

SEP 19 2016

10/24/16



Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • (602) 771-8690 fax
• www.azwater.gov •

ADWR
Well Abandonment Completion Report

- ❖ Review instructions prior to completing form in black or blue ink.
- ❖ The drilling firm or single well licensee must file this report within 30 days of completion of abandonment. (A.R.S. § 45-594, A.A.C. R12-15-816)

FILE NUMBER
A(2-4)26C DA
WELL REGISTRATION NUMBER
55 - 583962

**** PLEASE PRINT CLEARLY ****

SECTION 1. ABANDONMENT AUTHORIZATION

Drilling Firm

Mail To:	NAME NATIONAL EWP	DWR LICENSE NUMBER 823
	ADDRESS 1200 W. SAN PEDRO ST.	TELEPHONE NUMBER 480.558.3500
	CITY/STATE/ZIP GILBERT, AZ 85233	FAX 480.558.3525

SECTION 2. REGISTRY INFORMATION

Well Owner Information

FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL MOTOROLA SOLUTIONS, INC	CONTACT PERSON NAME AND TITLE TERRY LOCKWOOD
MAILING ADDRESS 2900 S. DIABLO WAY	TELEPHONE NUMBER 602-760-4763
CITY/STATE/ZIP CODE TEMPE, AZ 85282	FAX

Location of Well

WELL LOCATION ADDRESS (IF ANY) 7575 E. EARLL DRIVE SCOTTSDALE, AZ 85251						LATITUDE 33 ° 29 ' 0 "N Degrees Minutes Seconds			LONGITUDE 111 ° 55 ' 1 "W Degrees Minutes Seconds		
TOWNSHIP (NS) 2N	RANGE (EW) 4E	SECTION 26	160 ACRE SW 1/4	40 ACRE SE 1/4	10 ACRE NE 1/4	LAND SURFACE ELEVATION AT WELL Feet Above Sea Level					
COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK MAP PARCEL						METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> *GPS: Hand-Held <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade *IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE) <input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

SECTION 3.

Questions	Yes	No	Explanation:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be or is contaminated?	X		IF YES, EXPLAIN (ATTACH ADDITIONAL PAGE IF NECESSARY) SEE ATTACHMENT
2. Is there another well name or identification number associated with this well? (e.g., MW-1, PZ-4, Lot 29 Well, Smith Well, etc.)	X		IF YES, PLEASE STATE 7EX-5MA
3. Prior to abandonment, did the well have 20' of surface casing AND 20' of grout in the annular space surrounding the casing?	X		If no, was the top 20' of casing removed prior to setting the cement plug? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4. Was the well backfilled above the cement plug?	X		
5. Was the well casing video logged?	X		
6. Why was the well abandoned?	SEE ATTACHMENT		

Well Abandonment Completion Report

WELL REGISTRATION NUMBER

55 - 583962

SECTION 4. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)			PERFORATION TYPE (T)					SLOT SIZE IF ANY (inches)		
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE		SLOTTED	IF OTHER TYPE, DESCRIBE
0	352		-4	190	6"	X										
			190	350	6	X									SS	

Condition of casing: ☒ Good ☐ Fair ☐ Poor

Existing Annular Material (to the best of your knowledge)

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)							FILTER PACK			
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE
						GROUT	CHIPS	PELLETS				
-4	180				X							
180	185							X				
185	352									X		10X20

SECTION 5. ACTUAL WELL ABANDONMENT DESIGN (attach additional page if needed)

Refer to ADWR's Well Abandonment Handbook for additional information.

DEPTH TO WATER

100 Feet Below Land Surface

DATE ABANDONMENT COMPLETED

8-4-16

Casing Treatment						Sealing or Fill Material														
DEPTH FROM SURFACE		TREATMENT TYPE (T)				DEPTH FROM SURFACE		MATERIAL TYPE (T)							MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	VOLUME OF MATERIAL USED (cubic feet)				
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING WAS PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS THAT WERE ADDED	FROM (feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE			GROUT	CHIPS	PELLETS	SAND
0	4				X		-4	205				X							2.22	59.89

Actual Abandonment Method (See Well Abandonment Handbook)

CHECK ONE
☐ Standard Method ☒ Alternative 4: ☐ Other (please specify):
☐ Alternative 1 ☐ Variance Option
☐ Alternative 2 ☐ Alternative 5:
☐ Alternative 3 ☐ Variance Option 1
☐ Variance Option 2

Emplacement Method of Sealing or Fill Material

CHECK ONE
☐ Gravity
☐ Pressure Grouting
☒ Tremie Pumped
☐ Other (please specify):

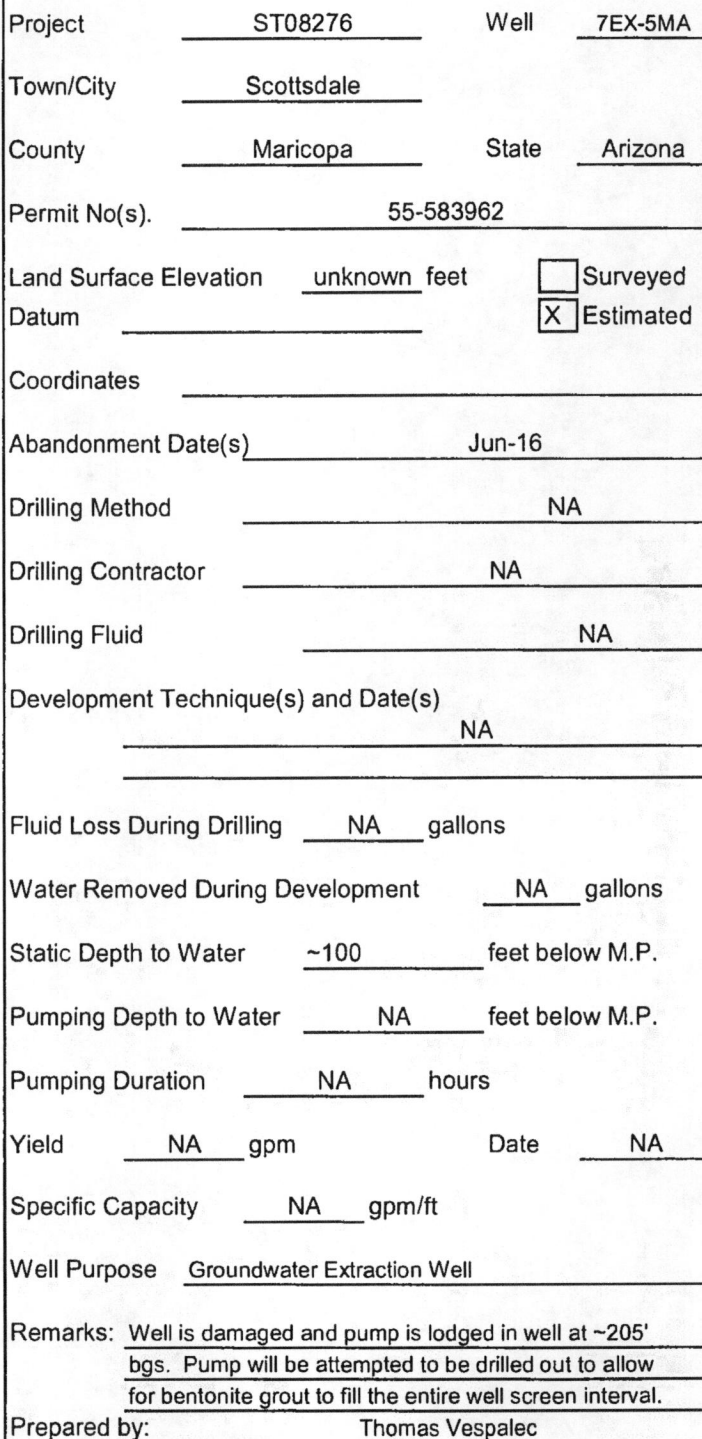
REMARKS

I state that this notice is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE
TOM MORELAND

SIGNATURE OF QUALIFYING PARTY
Tom Moreland
2016.09.12 17:34:53 -07'00'

DATE
9/12/16





Arizona Department of Water Resources
Groundwater Permitting and Wells Section
P.O. Box 36020 Phoenix, Arizona 85067-6020
(602) 771-8527 • www.azwater.gov

RECEIVED

MAY 04 2016

**Notice of Intent to
Abandon a Well**

FEE
\$150.00

7EX-5MA

ARIZONA DEPARTMENT
OF WATER RESOURCES

- ❖ Review instructions and the Well Abandonment Handbook prior to completing form with black or blue ink.
- ❖ You must include with your Notice:
 - Well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.
- ❖ Authority for fee: A.R.S. §45-113 and A.A.C. R12-15-104
- ** PLEASE PRINT CLEARLY ****

AMA / INA	B	SB
RECEIVED	DATE	WS
ISSUED	DATE	WQARF CERCLA
5/4/16		
5/9/16		002

FILE NUMBER
A(2-4)26CDA
WELL REGISTRATION NUMBER
55 - 583962

SECTION 1. REGISTRY INFORMATION

Well Type		Location of Well					
CHECK ONE		WELL LOCATION ADDRESS (IF ANY)					
<input type="checkbox"/> Domestic <input type="checkbox"/> Monitor / Piezometer		7575 E. Earll Drive, Scottsdale, AZ 85251					
<input type="checkbox"/> Stock <input type="checkbox"/> Geotechnical		TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE
<input type="checkbox"/> Irrigation <input type="checkbox"/> Mineral Exploration		2N	4E	26	SW 1/4	SE 1/4	NE 1/4
<input type="checkbox"/> Municipal <input checked="" type="checkbox"/> Other (please specify): Groundwater Remediation		COUNTY ASSESSOR'S PARCEL ID NUMBER			COUNTY WHERE WELL IS LOCATED		
ORIGINAL WELL OWNER (IF KNOWN) Siemens Components Inc.		BOOK MAP PARCEL			Maricopa		
ORIGINAL WELL DRILLING FIRM (IF KNOWN) Layne Christensen Co.		LATITUDE			LONGITUDE		
DRILL DATE (IF KNOWN) December 2000		33 ° 29 ' 0 " N			111 ° 55 ' 1 " W		
		Degrees Minutes Seconds			Degrees Minutes Seconds		
		METHOD OF LATITUDE/LONGITUDE (CHECK ONE) <input type="checkbox"/> *GPS: Hand-Held					
		<input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Conventional Survey <input type="checkbox"/> *GPS: Survey-Grade					
		*IF GPS WAS USED, GEOGRAPHIC COORDINATE DATUM (CHECK ONE)					
		<input type="checkbox"/> NAD-83 <input type="checkbox"/> Other (please specify):					

SECTION 2. OWNER INFORMATION

Well Owner		Landowner (if different from Well Owner)	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL Motorola Solutions, Inc.		FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL Banner Health System	
MAILING ADDRESS 2900 S. Diablo Way		MAILING ADDRESS 7575 East Earll Drive	
CITY / STATE / ZIP CODE Tempe, AZ 85282		CITY / STATE / ZIP CODE Scottsdale, AZ 85258	
CONTACT PERSON NAME AND TITLE Terry Lockwood		CONTACT PERSON NAME AND TITLE	
TELEPHONE NUMBER 602-760-4763	FAX	TELEPHONE NUMBER 480-941-7525	FAX

SECTION 3. ABANDONMENT AUTHORIZATION

Drilling Firm		Consultant (if applicable)	
NAME National EWP, Inc.		CONSULTING FIRM ARCADIS U.S., Inc.	
DWR LICENSE NUMBER #823	ROC LICENSE CATEGORY A-04	CONTACT PERSON NAME Michael Nesky	
TELEPHONE NUMBER 480-558-3600	FAX 480-718-8215	TELEPHONE NUMBER 480-905-9311	FAX 480-905-9353
		E-MAIL ADDRESS Michael.nesky@arcadis-us.com	

SECTION 4.

Questions	Yes	No	If Yes:
1. To your knowledge, is there any information that exists which indicates that the water in this well has been, may be, or is contaminated?	X		EXPLAIN (ATTACH ADDITIONAL PAGE IF NECESSARY) Indian Bend Wash Superfund Site, Area 7
2. Is there another well name or identification number associated with this well? (e.g., Lot 3 Well, MW-1, etc.)	X		PLEASE STATE 7EX-5MA
3. Was the well casing video logged?	X		INCLUDE CD OF VIDEO LOG WITH NOTICE OF INTENT Video showed pump lodged in well at ~205' bgs
4. Why is the well being abandoned?			The well is damaged, non-operational, and cannot be fixed. A replacement well (7EX-6MA) has been drilled and installed. EPA has requested the well be abandoned.

Notice of Intent to Abandon a Well

7EX-5MA

WELL REGISTRATION NUMBER

55 - 583962

Provide a well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

SECTION 5. ORIGINAL WELL CONSTRUCTION DESIGN (attach additional page if needed)

Existing Borehole			Existing Casing (to the best of your knowledge)													
DEPTH FROM SURFACE		BOREHOLE DIAMETER (inches)	DEPTH FROM SURFACE		OUTER DIAMETER (inches)	MATERIAL TYPE (T)				PERFORATION TYPE (T)						SLOT SIZE IF ANY (inches)
FROM (feet)	TO (feet)		FROM (feet)	TO (feet)		STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	IF OTHER TYPE, DESCRIBE	
0	355	10 3/4	0	49	6	X				X						
			49	189	6				Stainless Steel	X						
			189	349	6				Stainless Steel		X					0.02

Condition of casing: ☐ Good ☒ Fair ☐ Poor

Existing Annular Material (to the best of your knowledge)

DEPTH FROM SURFACE		ANNULAR MATERIAL TYPE (T)										FILTER PACK	
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITE GROUT	BENTONITE			IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE	
						GROUT	CHIPS	PELLETS					
5	180			X					The well surface completion is constructed in a well vault ~5 feet deep.				
180	185							X					
185	355									X		8/12	

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (attach additional page if needed)

DATE ABANDONMENT IS TO BEGIN

February 8, 2016

Refer to ADWR's Well Abandonment Handbook for additional information.

Casing Treatment							Sealing or Fill Material													
DEPTH FROM SURFACE		TREATMENT TYPE (T)					DEPTH FROM SURFACE		MATERIAL TYPE (T)								MIXING RATIO by (check one) <input type="checkbox"/> Weight <input checked="" type="checkbox"/> Volume	ESTIMATED VOLUME OF MATERIAL (cubic feet)		
		SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED			NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT	CEMENT-BENTONITE GROUT	SAND-BENTONITE GROUT	HIGH SOLIDS BENTONITE					SAND	
FROM (feet)	TO (feet)						GROUT	CHIPS						PELLETS						
0	0					None	5	350					X							255

Proposed Abandonment Method (See Well Abandonment Handbook)

CHECK ONE
☐ Standard Method
☐ Alternative 1
☐ Alternative 2
☒ Alternative 3
☐ Alternative 4:
☐ Variance Option *
☐ Alternative 5:
☐ Variance Option 1*
☐ Variance Option 2*
 * requires a letter requesting a variance

Emplacement Method of Sealing or Fill Material

CHECK ONE
☐ Gravity
☐ Pressure Grouting
☒ Tremie Pumped
☐ Other (please specify):

REMARKS Top 5' of well casing will be removed during well vault removal. The lodged pump at ~205' bgs will be drilled out to allow for emplacement of grout into screen below, down to total depth of the well.

I state that this notice is filed in compliance with A.R.S. § 45-594 and A.A.C. R12-15-816 and is complete and correct to the best of my knowledge and belief.

TYPE OR PRINT NAME AND TITLE

Teresa Lockwood

SIGNATURE OF WELL OWNER

Teresa Lockwood

DATE

4/19/2016

TYPE OR PRINT NAME AND TITLE

David K. Samples Facilities Director

SIGNATURE OF LANDOWNER, IF APPLICABLE (SEE INSTRUCTIONS)

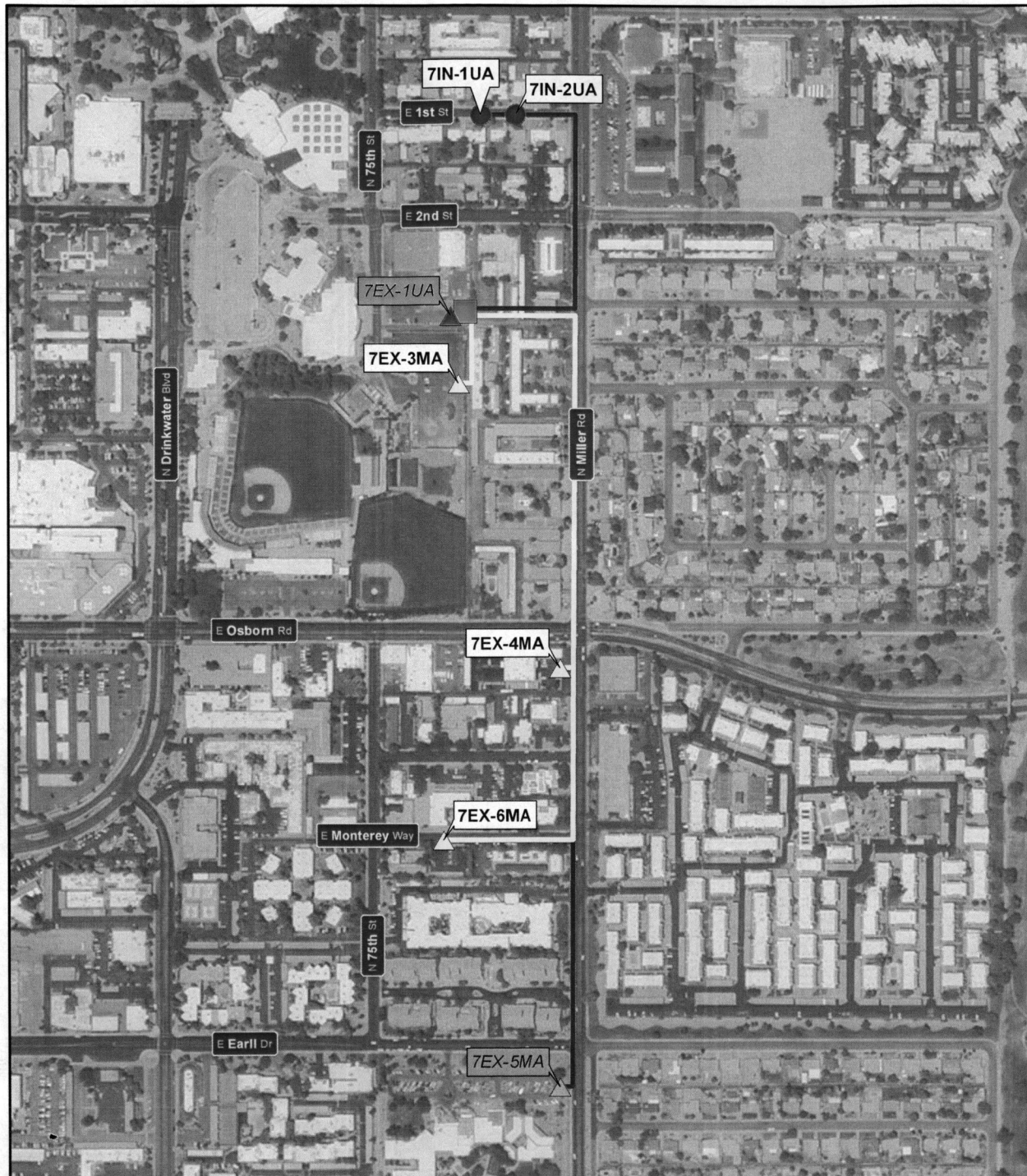
David K. Samples

DATE

4/19/2016

<p style="text-align: center;">Not to Scale</p> <p>Measuring Point is Top of Well Casing, Unless Noted Otherwise * Depth Below Ground Surface</p>	<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Project</td> <td style="width: 33%; border-bottom: 1px solid black;">ST08276</td> <td style="width: 33%;">Well</td> <td style="border-bottom: 1px solid black;">7EX-5MA</td> </tr> <tr> <td>Town/City</td> <td style="border-bottom: 1px solid black;">Scottsdale</td> <td>County</td> <td style="border-bottom: 1px solid black;">Maricopa</td> </tr> <tr> <td>State</td> <td style="border-bottom: 1px solid black;">Arizona</td> <td>Permit No(s).</td> <td style="border-bottom: 1px solid black;">55-583962</td> </tr> <tr> <td>Land Surface Elevation</td> <td style="border-bottom: 1px solid black;">unknown feet</td> <td><input type="checkbox"/> Surveyed</td> <td></td> </tr> <tr> <td>Datum</td> <td style="border-bottom: 1px solid black;"></td> <td><input checked="" type="checkbox"/> Estimated</td> <td></td> </tr> <tr> <td>Coordinates</td> <td colspan="3" style="border-bottom: 1px solid black;"></td> </tr> <tr> <td>Abandonment Date(s)</td> <td colspan="3" style="border-bottom: 1px solid black;">Jun-16</td> </tr> <tr> <td>Drilling Method</td> <td colspan="3" style="border-bottom: 1px solid black;">NA</td> </tr> <tr> <td>Drilling Contractor</td> <td colspan="3" style="border-bottom: 1px solid black;">NA</td> </tr> <tr> <td>Drilling Fluid</td> <td colspan="3" style="border-bottom: 1px solid black;">NA</td> </tr> <tr> <td>Development Technique(s) and Date(s)</td> <td colspan="3" style="border-bottom: 1px solid black;">NA</td> </tr> <tr> <td>Fluid Loss During Drilling</td> <td colspan="3" style="border-bottom: 1px solid black;">NA gallons</td> </tr> <tr> <td>Water Removed During Development</td> <td colspan="3" style="border-bottom: 1px solid black;">NA gallons</td> </tr> <tr> <td>Static Depth to Water</td> <td colspan="3" style="border-bottom: 1px solid black;">~100 feet below M.P.</td> </tr> <tr> <td>Pumping Depth to Water</td> <td colspan="3" style="border-bottom: 1px solid black;">NA feet below M.P.</td> </tr> <tr> <td>Pumping Duration</td> <td colspan="3" style="border-bottom: 1px solid black;">NA hours</td> </tr> <tr> <td>Yield</td> <td style="border-bottom: 1px solid black;">NA gpm</td> <td>Date</td> <td style="border-bottom: 1px solid black;">NA</td> </tr> <tr> <td>Specific Capacity</td> <td colspan="3" style="border-bottom: 1px solid black;">NA gpm/ft</td> </tr> <tr> <td>Well Purpose</td> <td colspan="3" style="border-bottom: 1px solid black;">Groundwater Extraction Well</td> </tr> <tr> <td>Remarks:</td> <td colspan="3" style="border-bottom: 1px solid black;">Well is damaged and pump is lodged in well at ~205' bgs. Pump will be attempted to be drilled out to allow for bentonite grout to fill the entire well screen interval.</td> </tr> <tr> <td>Prepared by:</td> <td colspan="3" style="border-bottom: 1px solid black;">Thomas Vespalec</td> </tr> </table>	Project	ST08276	Well	7EX-5MA	Town/City	Scottsdale	County	Maricopa	State	Arizona	Permit No(s).	55-583962	Land Surface Elevation	unknown feet	<input type="checkbox"/> Surveyed		Datum		<input checked="" type="checkbox"/> Estimated		Coordinates				Abandonment Date(s)	Jun-16			Drilling Method	NA			Drilling Contractor	NA			Drilling Fluid	NA			Development Technique(s) and Date(s)	NA			Fluid Loss During Drilling	NA gallons			Water Removed During Development	NA gallons			Static Depth to Water	~100 feet below M.P.			Pumping Depth to Water	NA feet below M.P.			Pumping Duration	NA hours			Yield	NA gpm	Date	NA	Specific Capacity	NA gpm/ft			Well Purpose	Groundwater Extraction Well			Remarks:	Well is damaged and pump is lodged in well at ~205' bgs. Pump will be attempted to be drilled out to allow for bentonite grout to fill the entire well screen interval.			Prepared by:	Thomas Vespalec		
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Prepared by:	Thomas Vespalec																																																																																				

	PROPOSED WELL ABANDONMENT GROUNDWATER EXTRATION WELL 55-583962 3703 N. 75th St. Scottsdale, Arizona	FIGURE 1
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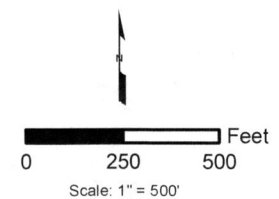


LEGEND

- Area 7 GWETS
- Groundwater injection well (existing)
- GWETS injection piping (existing)
- △ Groundwater extraction well (existing)
- ▲ Groundwater extraction well (inactive)
- ▲ Groundwater extraction well (abandoned)
- GWETS extraction piping (existing)
- GWETS extraction piping (abandoned)

NOTES

- Aerial photo source: ESRI World Imagery.
- GWETS = Groundwater extraction and treatment system.



NORTH INDIAN BEND WASH - AREA 7
SCOTTSDALE, ARIZONA

SITE FEATURES MAP

 **ARCADIS**

FIGURE
1

Arizona Department of Water Resources

3550 N Central Ave.

Phoenix AZ 85012

Customer:

ARCADIS
630 PLAZA DRIVE, SUITE 600
HIGHLANDS RANCH, CO 80129

Receipt #: 16-45004
Office: MAIN OFFICE
Receipt Date: 05/04/2016
Sale Type: IN_PERSON
Cashier: WRSYM

Item No.	Index	AOBJ	Description	Ref ID	Qty	Unit Price	Ext Price
67487	15239	4439-TT	Notice of intention to abandon a well	583962	1	150.00	150.00
RECEIPT TOTAL:							150.00

Payment type: CHECK

Amount Paid: \$150.00

Payment Received Date: 05/04/2016

Check #	194084
---------	--------

Notes: FROM TTA.

ARIZONA DEPARTMENT of WATER RESOURCES

3550 North Central Avenue, Second Floor

Phoenix, AZ 85012

602-771-8500

azwater.gov

May 9, 2016

MOTOROLA SOLUTIONS, INC
2900 S DIABLO WAY, BUILDING A, SUITE 150
ATTN: TERRY LOCKWOOD, NIBW PROGRAM MGR
TEMPE, AZ 85282

Registration No. 55- 583962
File Number: A(2-4) 26 CDA

Dear Well Owner:



DOUGLAS A. DUCEY
Governor

THOMAS BUSCHATZKE
Director

Enclosed is a copy of the Notice of Intent to Abandon a Well (NOI) which you or your driller recently filed with the Department of Water Resources. This letter is to inform you that the Department has approved the NOI and has mailed an abandonment authorization card to your designated well drilling contractor. The driller may not begin abandonment until he/she has received the authorization, and must keep it in their possession at the well site during the abandonment.

The well abandonment authorization card and a blank Well Abandonment Completion Report form (form 55-58) have been sent to your driller. Arizona statute [A.R.S. § 45-594] requires the driller to furnish the Department with a complete and accurate Well Abandonment Completion Report within thirty (30) days after completion of abandonment. Arizona statute also requires a well owner to submit a Well Owner's Notification of Abandonment form (form 55-36) within thirty (30) days after the well has been properly abandoned. A copy of the form is enclosed for your convenience. An electronic copy (compact disc or electronic file) of all video logs, if performed, must be included with the well owner's notification or Well Abandonment Completion Report. You should insist, and ensure, all of this is done.

If you change drillers, you must supply the Department with the new driller's identity on a Request to Change Well Information form (form 55-71A). Well abandonments shall be performed only by a licensed well drilling contractor or single well licensee.

Sincerely,

A handwritten signature in dark ink, appearing to read "David A. Ducey", is written over a light blue horizontal line.

Groundwater Permitting and Wells Section

ARIZONA DEPARTMENT OF WATER RESOURCES
3550 North Central Avenue, Second Floor
Phoenix, Arizona 85012

ABANDON

NOTICE! This well is located in or near an area of groundwater contamination (WQARF/CERCLA/DOD or Other). Be advised that special requirements may apply.

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILLING OPERATIONS

WELL REGISTRATION NO: **55-583962**

AUTHORIZED DRILLER: **NATIONAL EWP, INC.**

LICENSE NO: **823**

NOTICE OF INTENTION TO ABANDON EXEMPT WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: **MOTOROLA SOLUTIONS, INC 2900 S DIABLO WAY, BUILDING A, SUITE 150 ATTN:TERRY LOCKWOOD, NIBW
PROGRAM MGR TEMPE, AZ, 85282**

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

NE 1/4 of the SE 1/4 of the SW 1/4 Section 26 Township 2.0 NORTH Range 4.0 EAST

NO. OF WELLS IN THIS PROJECT: **1**

ASSESSOR'S PARCEL NO: **130-19-028**

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE DAY OF



GROUNDWATER PERMITTING AND WELLS

THE DRILLER MUST FILE A WELL ABANDONMENT COMPLETION REPORT WITHIN 30 DAYS OF ABANDONMENT.



*

ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION
500 North Third Street
Phoenix, Arizona 85004

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILL OPERATIONS

WELL REGISTRATION NO: 55-583962

AUTHORIZED DRILLER: LAYNE CHRISTENSEN COMPANY

LICENSE NO: 7

NOTICE OF INTENTION TO DRILL A EXEMPT WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

WELL OWNER: SMI HOLDINGS LLC 153 E 53RD ST NEW YORK, NY 10022

The well(s) is/are to be located in the:

NE ¼ of the SE ¼ of the SW ¼ Section 26 Township 2 NORTH Range 4 EAST

No. of wells in this project: 1

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE 6TH DAY OF DECEMBER, 2001


GROUNDWATER MANAGEMENT SUPPORT

THE DRILLER MUST FILE A LOG OF THE WELL
WITHIN 30 DAYS OF COMPLETION OF DRILLING



ARIZONA DEPARTMENT OF WATER RESOURCES

500 North 3rd Street, Phoenix, Arizona 85004
Telephone (602) 417-2470
Fax (602) 417-2422



JANE DEE HULL
Governor

RITA PEARSON MAGUIRE
Director

December 14, 2000

SMI HOLDINGS LLC
153 E 53RD ST
NEW YORK, NY 10022

Registration No. 55-583962
File No. A(2-4) 26 CDA

Dear Well Owner:

Enclosed is a copy of the Notice of Intention (NOI) to Drill a well. This NOI, which was recently filed with this Department, is being returned to you as evidence of your compliance with ARS §45-596. The enclosed Completion Report is to be submitted when pump equipment is installed. The Drilling Card and Well Drilling Report form have been sent to your driller. He may not begin drilling until he has received the Drilling Card and it must be displayed on the rig during drilling. If you change drillers, you must supply this Department with the new driller's identity. Please ensure that the driller you select is licensed to drill the type of well you require. All well drillers must pass an examination proving they understand the drilling methods for that particular license, and are familiar with the laws and regulations which govern well construction in Arizona.

If it is necessary to change the location of the proposed well, immediately contact the Department of Water Resources to obtain written permission before proceeding with the drilling. A properly signed, amended Drilling Card must be in the possession of the driller before drilling commences at a different location than originally authorized.

ARS §45-600 requires the registered well owner to submit a completion report within thirty (30) days after the installation of pumping equipment. It also requires the driller to furnish this Department a complete and accurate log of the well within thirty (30) days after completion of drilling. You should insist, and ensure, that both of these are done.

If in the course of drilling a new well, it is determined that the new well cannot be successfully completed as initially intended (dry hole, cave in, lost tools, etc.), the new well must be properly abandoned and a Well Abandonment Completion Report submitted per R12-15-816 F.

Per ARS §45-593 (C), the person to whom a well is registered shall notify this Department of a change in ownership of the well and/or information pertaining to the physical characteristics of the well in order to keep this well registration file current and accurate. We have enclosed a Change of Well Information Form should it be needed in the future.

Sincerely,

Jeannie Aguilar
Water Resource Technician
Groundwater Management Support Section

Enclosures

ARIZONA DEPARTMENT OF WATER RESOURCES

500 North Third Street, Phoenix, Arizona 85004

Telephone (602) 417-2470

Fax (602) 417-2422



November 17, 2000

SMI HOLDINGS LLC
153 E 53RD ST
NEW YORK NY 10022

Assigned Referenced Number: 55-583962

**PLEASE RETURN
ALL PAPERS**

Dear Applicant:

The Department of Water Resources recently received your Notice of Intent to **Drill, Deepen, Replace, or Modify A Well**. However, our review indicates that the filing(s) is incomplete under the Groundwater Management Act for the following reason(s)

- (A) Landowner Info. Incomplete: _____
- (C) County not Given: _____
- (D) Book, Map, Parcel Incorrect: _____
- (E) Number of Acres Not Given: _____
- (F) Legal Description Incomplete: _____
 - ___ Incomplete Quarter Sections
 - ___ Incomplete/Incorrect Section
 - ___ Incomplete/Incorrect Township
 - ___ Incomplete/Incorrect Range
- (G) Recommendation Not Selected: _____
- (H) Date Of Approval Not Given: _____
- (1) Well owner Info. Incomplete: _____
- (2) Action Requested (check one): _____
- (3) Starting Date Not Given: _____
- (4) Casing To Be Used (answer all): _____
- (5) Design Capacity of Pump : _____
- (6) Lessee Info. Incomplete: _____
- (7) Primary Water Use Not Given: _____
- (8) Other Water Uses Not Given: _____

- (9) Place of Use Incomplete (refer to "F"): _____
- (10) Type of Well (check one): _____
- (11) Select One (define "other"): _____
- (12) Select "Yes" or "No": _____
- (13) Incomplete Driller Information: _____
- (14) Printed Name/Title Not Given: _____
- (15) Incorrect/Unauthorized Signature: _____
- Requires Current Forms: _____
- Please Refer to the Attached Letter: ☒
- Requires \$10.00 Filing Fee: _____

Other Reason(s): _____

Initials JA

In accordance with A.R.S. § 45-596, Paragraph D, this application is being returned as a "statement of determination", requesting information necessary to make it correct and complete. If the necessary information is not received by the Department within sixty (60) days, the application may be denied. You would then have to re-initiate the N O I process to receive a drilling authority for this location. If you have any questions, please contact the Groundwater Management Support Section at (602) 417-2470. **ATTACH THIS CHECK LIST WHEN RESUBMITTING THE COMPLETED NOTICE OF INTENT AND RETURN TO BOX 458, PHOENIX, ARIZONA 85004-3003. YOU MAY ALSO CONTACT YOUR DRILLER OR COUNTY ASSESSORS OFFICE FOR ASSISTANCE PERTAINING TO THE NECESSARY INFORMATION THAT IS REQUIRED TO COMPLETE YOUR APPLICATION.**

ARIZONA DEPARTMENT OF WATER RESOURCES
Groundwater Management Support Section
500 North Third Street, Phoenix, Arizona 85004
Telephone 602 417-2470
Fax 602 417-2422
November 17, 2000



JANE DEE HULL
Governor

RITA PEARSON
MAGUIRE
Director

SMI Holdings, LLC
153 E. 53rd Street
New York, NY 10022

RE: Well Registration # 583962 Well File A (2-4) 26 CDA

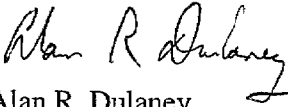
Dear Sirs:

Your application to drill a monitor well within the Phoenix Active Management Area was received on October 18, 2000. The Department has determined that it is incomplete and incorrect. The form you filed is for drilling a new monitor or piezometer well, neither of which is intended to pump groundwater as its primary purpose. You have indicated that the primary purpose of this well is to withdraw contaminated groundwater from the Middle Alluvial Unit, treat the water to remove contaminants, and re-inject the treated water into the Upper Alluvial Unit. In order to construct this pump and treat system, you submit a Notice of Intent to Drill, Deepen, Modify, or Replace a Well. The proper forms and instructions are attached. Copies are being sent to your consultant, LFR Levine-Fricke, in the event you wish your consultant to file these applications for you.

In accordance with A.R.S. § 45-596.D, this application is being returned to you requesting information necessary to make it complete and correct (the correct form). Please return all papers. If the necessary information is not received by the Department within sixty (60) days, the application may be denied. You would then have to re-initiate the Notice of Intent to Drill process to receive a drilling authority for this location.

If you have any questions, please call the Groundwater Management Support Section at 602-417-2470. Thank you for your cooperation.

Sincerely,


Alan R. Dulaney

attachments

cc: Marshall Brown
LFR Levine-Fricke
8230 E. Raintree Drive
Scottsdale, AZ 85260

**ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION
MAIL TO: P. O. BOX 458, PHOENIX, ARIZONA 85001-0458
FOR MORE INFORMATION CALL: MONICA ORTIZ 602-417-2470
NOTICE OF INTENTION TO DRILL, DEEPEN, REPLACE OR MODIFY A WELL**

PLEASE COMPLETE ALL ITEMS IN THE BOX BELOW DOWN TO COUNTY OR LOCAL AUTHORITY ENDORSEMENT. IF WATER FROM THE PROPOSED WELL (LISTED BELOW) WILL BE USED FOR DOMESTIC PURPOSES ON A PARCEL OF LAND 20 OR FEWER ACRES, THE APPLICABLE COUNTY OR LOCAL HEALTH AUTHORITY MUST ENDORSE ALL ITEMS IN THE BOX BEFORE SUBMISSION TO THE DEPARTMENT OF WATER RESOURCES. ITEMS C, D, E, AND F MAY BE AVAILABLE FROM YOUR COUNTY ASSESSOR'S OFFICE.

A. LANDOWNER'S NAME _____ CURRENT MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____

B. TELEPHONE NO. _____ COUNTY ASSESSOR'S PARCEL ID INFORMATION: _____

C. WELL LOCATED IN _____ COUNTY D. _____ E. _____ OFFICIAL SEAL OR STAMP

BOOK _____ MAP _____ PARCEL _____ # OF ACRES _____

WELL/LAND LOCATION (MUST BE COMPLETED AS REQUESTED)

F. 1/4 1/4 1/4 OF SECTION _____ TOWNSHIP _____ N/S _____ RANGE _____ E/W _____

10AC 40AC 160AC COUNTY OR LOCAL AUTHORITY ENDORSEMENT _____

CHECK ONE
G. RECOMMEND APPROVAL _____; INSUFFICIENT INFORMATION TO MAKE A DETERMINATION _____, VARIANCE REQUIRED _____ (EXPLANATION ATTACHED)

H. DATE _____ AUTHORIZED SIGNATURE _____ TITLE _____

1. OWNER OF WELL:

NAME _____
CURRENT MAILING ADDRESS _____
CITY _____ STATE _____ ZIP _____
TELEPHONE NUMBER _____

2. ACTION REQUESTED

DRILL NEW WELL _____ DEEPEN _____
MODIFY _____ REPLACE _____

WELL REGISTRATION NO 55- _____

FOR A REPLACEMENT WELL PROVIDE:
MAX. CAPACITY OF THE ORIGINAL WELL
_____ GALLONS PER MINUTE;

DISTANCE FROM THE ORIGINAL WELL:
_____ FEET

3. CONSTRUCTION WILL START ABOUT
MONTH _____ YEAR _____

4. TYPE OF CASING FOR PROPOSED WELL
SURFACE CASING
DIAMETER _____ " DEPTH _____'

DOWNHOLE CASING:
DIAMETER _____ " DEPTH _____'

5. DESIGN PUMP CAPACITY:
_____ GALLONS PER MINUTE

6. LESSEE OF LAND OF WELLSITE:

NAME _____
CURRENT MAILING ADDRESS _____
CITY _____ STATE _____ ZIP _____
TELEPHONE _____

7. PRINCIPAL USE OF WATER: (BE SPECIFIC)

8. OTHER USES OF WATER: (BE SPECIFIC)

FOR DEPARTMENT USE ONLY

REGISTRATION NO 55- _____
DATE FILED _____
FILE NO. _____

AMA/TNA _____
W/S _____ S/B _____

PROCESSED BY _____
DATE MAILED _____

9. PLACE OF USE (LEGAL DESCRIPTION OF LAND):

1/4 1/4 1/4 SECTION _____
10AC 40AC 160AC
TWN SHP _____ N/S _____ RNG _____ E/W _____

10. TYPE OF WELL (CHECK ONE)

EXEMPT _____ NON-EXEMPT _____

11. CHECK ONE:

RESIDENTIAL _____ STOCKWATER _____
OTHER _____

12. IS THE PROPOSED WELLSITE WITHIN 100 FEET OF A SEPTIC TANK SYSTEM, SEWER DISPOSAL AREA, LANDFILL, HAZARDOUS MATERIALS OR PETROLEUM STORAGE AREAS AND TANKS?

YES _____ NO _____

13. DRILLING FIRM:

NAME _____
MAILING ADDRESS _____
CITY _____ STATE _____ ZIP _____
TELEPHONE NO _____

DWR LICENSE NUMBER _____

ROC LICENSE CATEGORY _____

I STATE THAT THIS NOTICE IS FILED IN COMPLIANCE WITH A.R.S. § 45-596, IS COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AND THAT I UNDERSTAND THE LIMITATIONS AND CONDITIONS SET FORTH ON THE REVERSE SIDE OF THIS FORM

14. TYPE OR PRINT NAME AND TITLE

15. SIGNATURE OF LANDOWNER/LESSEE OF WELLSITE

16. DATE

APPLICATION GUIDELINES

In accordance with Arizona Revised Statutes ("A.R.S.") §§ 41-1008 and 1079, the Department of Water Resources (Department) provides the following information regarding the application review process for authority to drill.

NECESSARY STEPS & INSTRUCTIONS TO OBTAIN DRILLING AUTHORITY

1. Pursuant to A.R.S. § 45-596, a person may not drill, cause to be drilled, deepen or modify any well for which a permit is not required without first filing a Notice of Intent to Drill with the Department. Only a well drilling contractor licensed in the State of Arizona or a single well licensee (a person licensed to drill or modify one exempt well on his or her own property) is authorized to drill, deepen or modify a well. Drilling may not begin until the well drilling contractor or licensee has possession of a drilling card at the well site, issued by the Director in the name of the well drilling contractor or licensee, and which authorizes the drilling of the specific well in a specific location. To assist you in understanding the requirements for this application, copies of A.R.S. § 45-596 and Arizona Administrative Code ("A.A.C.") R12-15-810 are available at the Department bookstore (602-417-2450 x7127).
2. If replacing, deepening, or modifying an existing well, provide the registration number of the existing well in item 2. A replacement well is one located no more than 660 feet from the original well and that is not expected to annually withdraw more groundwater than historically withdrawn from the original well.
3. Information to complete items 3, 4, 5 and 13 may be available from your driller.
4. Information to complete items 9 and 12 may be available from your County Assessor's Office.
5. For item 10, in an Active Management Area, A.R.S. § 45-454 only allows non-irrigation uses for "exempt" wells. If the proposed use includes the growing of 2 or more acres of plants for sale or human/animal consumption (irrigation use), the well does not qualify as an exempt well.
6. An exempt well, referred to in Item 10, means a well with a pump with a maximum capacity of not more than thirty-five gallons per minute and used for non-irrigation purposes.
7. For item 11, in an Active Management Area, A.R.S. § 45-454 allow up to 56 acre feet per year of pumping from a domestic (residential) or stock watering exempt well, and up to 10 acre ft per year from an exempt well used for other (usually commercial non-irrigation) purposes.
8. If any water from a proposed well on a parcel of twenty or fewer acres will be used for domestic purposes, as defined in § 45-454, the applicant must submit a well site plan of the property. The plan must be on an 8½" x 11" piece of plain paper with representation of the locations of all structures and proximity of adjacent lot lines, to scale. It must include the county assessor's parcel identification number. The plan must show the proposed well location and the location of any septic tank or sewer system that is either located on the property or within one hundred feet of the proposed well site, as well as indicating the measured shortest distance between the proposed well and existing septic tank system. **The plan must demonstrate that the well will not be drilled within one hundred feet of any septic or sewer system.**
9. The site plan must be approved by the county health authority, or by a local health authority in areas where the county health authority has delegated authority to approve septic or sewer systems. Endorsement by the county/local authority is based solely on the best available judgement that the proposed well, as shown on the site plan submitted, is 100 feet or more from all known and visually identifiable sewage treatment systems. It is not a representation that a well placed at this site will be guaranteed as to quantity or quality. In areas where there is no local or county authority that controls installation of septic tanks or sewer systems, or if the health authority is unable to determine whether the proposed well location complies with state and local requirements, the applicant must apply for approval directly to the Department of Water Resources.
10. If an individual other than the land owner or lessee signs this notice, an original letter of authorization from the land owner/lessee, stating that the individual has permission to sign this specific notice on his or her behalf, must accompany the notice.
11. Please mail **two original Notices with original signatures and two site plans** and, in accordance with A.R.S. § 45-113, a **check or money order (no cash) in the amount of \$10.00** to P. O. Box 458, Phoenix Arizona, 85001-0458, or hand deliver to 500 North Third Street, Phoenix, Arizona.
12. Arizona Revised Statute § 45-596(D) provides that the Director of the Department is to determine whether or not all information required on this form has been submitted. If not, the person filing the Notice will be notified, and the drilling or modification of the well may **not** proceed.
13. This form is not applicable for non-exempt wells (those yielding more than thirty-five gallons per minute) within an Active Management Area. Contact Groundwater Management for further information regarding the appropriate notice to file with the Department.

TIME FRAME FOR REVIEW OF YOUR APPLICATION

Within 15 days after receipt of your Notice of Intent the Arizona Department of Water Resources ("Department") will determine whether your application should be granted or denied, unless this time is extended for lack of a complete application. If your application is incomplete, the Department will notify you in writing and will specify what information is necessary to make the application complete. Until the missing information is received, the time frame for review of your application will be suspended. Your application will not be complete until all of the requested information is received. If you do not supply the missing information within sixty (60) days, the Department may deem your application withdrawn and close the file.

At the end of its review, the Department will send you a written notice either granting or denying your application for drilling authority. If your application is approved, the Drill Card will be mailed directly to the drilling contractor. If denied, the Department's notice will state justification for the denial and an explanation of your right to appeal.

CONSTRUCTION AND FOLLOW UP REQUIREMENTS

1. Construction and abandonment standards for wells, must be in accordance with Department Regulations. A.R.S. § 45-594 and Arizona Administrative Code R12-15-811 require the well to be constructed with a twenty foot steel surface seal casing, including a one foot steel stickup and one and one-half inches of grout seal around the casing from the surface to a depth of twenty feet, unless a variance is granted (**see A.R.S. § 45-596 (G) for procedure to follow in requesting a variance**).
2. Pursuant to § 45-596(E), the drilling, deepening or modification of the well must be completed within one year of the date of the Notice of Intent. If the well is not completed within one year, a new Notice of Intent must be filed before proceeding with further construction.
3. If a well which was originally drilled as an exploration well, a monitor well, a piezometer well or for any use other than domestic use is later proposed to be converted to use for domestic purposes as defined in § 45-454, the well owner must file a Notice of Intent to Drill and comply with the requirements of § 45-596 before the well is converted and any water from that well is used for domestic purposes.
4. Within thirty days after installation of pumping equipment, the registered well owner must file a Completion Report with the Department. The person to whom a well is registered also must notify the Department of a change in ownership or a change in data relating to this well.

**ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION
MAIL TO: P. O. BOX 458, PHOENIX, ARIZONA 85001-0458
FOR MORE INFORMATION CALL: MONICA ORTIZ 602-417-2470
NOTICE OF INTENTION TO DRILL, DEEPEN, REPLACE OR MODIFY A WELL**

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A. LANDOWNER'S NAME _____		CURRENT MAILING ADDRESS _____		CITY _____	STATE _____	ZIP _____
B. TELEPHONE NO. _____		COUNTY ASSESSOR'S PARCEL ID INFORMATION				
C. WELL LOCATED IN _____ COUNTY		D. _____	E. _____	OFFICIAL SEAL OR STAMP		
		BOOK _____	MAP _____	PARCEL _____	# OF ACRES _____	
WELL/LAND LOCATION (MUST BE COMPLETED AS REQUESTED)						
F. _____	1/4 _____	1/4 _____	1/4 _____	OF SECTION _____	TOWNSHIP _____	N/S _____
10AC _____	40AC _____	160AC _____	RANGE _____ E/W _____			
COUNTY OR LOCAL AUTHORITY ENDORSEMENT _____						
CHECK ONE						
G. RECOMMEND APPROVAL _____, INSUFFICIENT INFORMATION TO MAKE A DETERMINATION _____, VARIANCE REQUIRED _____ (EXPLANATION ATTACHED)						
H. DATE _____		AUTHORIZED SIGNATURE _____			TITLE _____	

1. OWNER OF WELL:

NAME _____
CURRENT MAILING ADDRESS _____
CITY _____ STATE _____ ZIP _____
TELEPHONE NUMBER _____

2. ACTION REQUESTED

DRILL NEW WELL _____ DEEPEN _____
MODIFY _____ REPLACE _____

WELL REGISTRATION NO 55- _____

FOR A REPLACEMENT WELL PROVIDE:
MAX. CAPACITY OF THE ORIGINAL WELL _____
GALLONS PER MINUTE;

DISTANCE FROM THE ORIGINAL WELL _____
FEET

3. CONSTRUCTION WILL START ABOUT
MONTH _____ YEAR _____

4. TYPE OF CASING FOR PROPOSED WELL:
SURFACE CASING _____
DIAMETER _____ " DEPTH _____

DOWNHOLE CASING _____
DIAMETER _____ " DEPTH _____

5. DESIGN PUMP CAPACITY:
_____ GALLONS PER MINUTE

6. LESSEE OF LAND OF WELLSITE:

NAME _____
CURRENT MAILING ADDRESS _____
CITY _____ STATE _____ ZIP _____
TELEPHONE: _____

7. PRINCIPAL USE OF WATER (BE SPECIFIC)

8. OTHER USES OF WATER (BE SPECIFIC)

FOR DEPARTMENT USE ONLY

REGISTRATION NO. 55- _____
DATE FILED _____
FILE NO _____
AMA/INA _____
W/S _____ S/B _____
PROCESSED BY _____
DATE MAILED _____

9. PLACE OF USE (LEGAL DESCRIPTION OF LAND):

_____ 1/4 _____ 1/4 _____ 1/4 SECTION _____
10AC 40AC 160AC
TWNSHP _____ N/S _____ RNG _____ E/W _____

10. TYPE OF WELL (CHECK ONE):

EXEMPT _____ NON-EXEMPT _____

11. CHECK ONE:

RESIDENTIAL _____ STOCKWATER _____
OTHER _____

12. IS THE PROPOSED WELLSITE WITHIN 100 FEET OF A SEPTIC TANK SYSTEM, SEWER DISPOSAL AREA, LANDFILL, HAZARDOUS MATERIALS OR PETROLEUM STORAGE AREAS AND TANKS?

YES _____ NO _____

13. DRILLING FIRM:

NAME _____
MAILING ADDRESS _____
CITY _____ STATE _____ ZIP _____
TELEPHONE NO _____
DWR LICENSE NUMBER _____
ROC LICENSE CATEGORY _____

I STATE THAT THIS NOTICE IS FILED IN COMPLIANCE WITH A.R.S. § 45-596, IS COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AND THAT I UNDERSTAND THE LIMITATIONS AND CONDITIONS SET FORTH ON THE REVERSE SIDE OF THIS FORM.

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At the end of its review, the Department will send you a written notice either granting or denying your application for drilling authority. If your application is approved, the Drill Card will be mailed directly to the drilling contractor. If denied, the Department's notice will state justification for the denial and an explanation of your right to appeal.

CONSTRUCTION AND FOLLOW UP REQUIREMENTS

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2. Pursuant to § 45-596(E), the drilling, deepening or modification of the well must be completed within one year of the date of the Notice of Intent. If the well is not completed within one year, a new Notice of Intent must be filed before proceeding with further construction.
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PLEASE COMPLETE ALL ITEMS IN THE BOX BELOW DOWN TO COUNTY OR LOCAL AUTHORITY ENDORSEMENT. IF WATER FROM THE PROPOSED WELL (LISTED BELOW) WILL BE USED FOR DOMESTIC PURPOSES ON A PARCEL OF LAND 20 OR FEWER ACRES, THE APPLICABLE COUNTY OR LOCAL HEALTH AUTHORITY MUST ENDORSE ALL ITEMS IN THE BOX BEFORE SUBMISSION TO THE DEPARTMENT OF WATER RESOURCES. ITEMS C, D, E, AND F MAY BE AVAILABLE FROM YOUR COUNTY ASSESSOR'S OFFICE.

A. LANDOWNER'S NAME _____ CURRENT MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____

B TELEPHONE NO. _____ - _____ - _____ COUNTY ASSESSOR'S PARCEL ID INFORMATION: _____

C WELL LOCATED IN _____ COUNTY D _____ E _____ OFFICIAL SEAL OR STAMP _____

BOOK _____ MAP _____ PARCEL _____ # OF ACRES _____

WELL/LAND LOCATION (MUST BE COMPLETED AS REQUESTED)

F. _____ 1/4 _____ 1/4 _____ 1/4 OF SECTION _____ TOWNSHIP _____ N/S _____ RANGE _____ E/W _____

10AC _____ 40AC _____ 160AC _____ COUNTY OR LOCAL AUTHORITY ENDORSEMENT _____

CHECK ONE
G RECOMMEND APPROVAL _____; INSUFFICIENT INFORMATION TO MAKE A DETERMINATION _____, VARIANCE REQUIRED _____ (EXPLANATION ATTACHED) _____

H. DATE _____ AUTHORIZED SIGNATURE _____ TITLE _____

1. OWNER OF WELL:

NAME _____

CURRENT MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE NUMBER _____ - _____ - _____

2. ACTION REQUESTED

DRILL NEW WELL _____ DEEPEN _____

MODIFY _____ REPLACE _____

WELL REGISTRATION NO 55- _____

FOR A REPLACEMENT WELL PROVIDE
MAX. CAPACITY OF THE ORIGINAL WELL
_____ GALLONS PER MINUTE;

DISTANCE FROM THE ORIGINAL WELL _____ FEET

3. CONSTRUCTION WILL START ABOUT.

MONTH _____ YEAR _____

4. TYPE OF CASING FOR PROPOSED WELL

SURFACE CASING _____

DIAMETER: _____ " DEPTH: _____'

DOWNHOLE CASING

DIAMETER: _____ " DEPTH: _____'

5. DESIGN PUMP CAPACITY:

_____ GALLONS PER MINUTE

6. LESSEE OF LAND OF WELLSITE

NAME _____

CURRENT MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE: _____ - _____ - _____

7. PRINCIPAL USE OF WATER (BE SPECIFIC)

8. OTHER USES OF WATER (BE SPECIFIC).

9. PLACE OF USE (LEGAL DESCRIPTION OF LAND):

_____ 1/4 _____ 1/4 _____ 1/4 SECTION _____

10AC _____ 40AC _____ 160AC _____

TWNSHP _____ N/S _____ RNG _____ E/W _____

10. TYPE OF WELL (CHECK ONE):

EXEMPT _____ NON-EXEMPT _____

11. CHECK ONE:

RESIDENTIAL _____ STOCKWATER _____

OTHER _____

12. IS THE PROPOSED WELLSITE WITHIN 100 FEET OF A SEPTIC TANK SYSTEM, SEWER DISPOSAL AREA, LANDFILL, HAZARDOUS MATERIALS OR PETROLEUM STORAGE AREAS AND TANKS?

YES _____ NO _____

13. DRILLING FIRM:

NAME _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE NO _____

DWR LICENSE NUMBER _____

ROC LICENSE CATEGORY _____

FOR DEPARTMENT USE ONLY

REGISTRATION NO. 55- _____

DATE FILED _____

FILE NO _____

AMA/INA _____

W/S _____ S/B _____

PROCESSED BY _____

DATE MAILED _____

I STATE THAT THIS NOTICE IS FILED IN COMPLIANCE WITH A.R.S. § 45-596, IS COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AND THAT I UNDERSTAND THE LIMITATIONS AND CONDITIONS SET FORTH ON THE REVERSE SIDE OF THIS FORM

14. TYPE OR PRINT NAME AND TITLE

15. SIGNATURE OF LANDOWNER/LESSEE OF WELLSITE

16. DATE

APPLICATION GUIDELINES

In accordance with Arizona Revised Statutes ("A.R.S.") §§ 41-1008 and 1079, the Department of Water Resources (Department) provides the following information regarding the application review process for authority to drill.

NECESSARY STEPS & INSTRUCTIONS TO OBTAIN DRILLING AUTHORITY

1. Pursuant to A.R.S. § 45-596, a person may not drill, cause to be drilled, deepen or modify any well for which a permit is not required without first filing a Notice of Intent to Drill with the Department. Only a well drilling contractor licensed in the State of Arizona or a single well licensee (a person licensed to drill or modify one exempt well on his or her own property) is authorized to drill, deepen or modify a well. Drilling may not begin until the well drilling contractor or licensee has possession of a drilling card at the well site, issued by the Director in the name of the well drilling contractor or licensee, and which authorizes the drilling of the specific well in a specific location. To assist you in understanding the requirements for this application, copies of A.R.S. § 45-596 and Arizona Administrative Code ("A.A.C.") R12-15-810 are available at the Department bookstore (602-417-2450 x7127).
2. If replacing, deepening, or modifying an existing well, provide the registration number of the existing well in item 2. A replacement well is one located no more than 660 feet from the original well and that is not expected to annually withdraw more groundwater than historically withdrawn from the original well.
3. Information to complete items 3, 4, 5 and 13 may be available from your driller.
4. Information to complete items 9 and 12 may be available from your County Assessor's Office.
5. For item 10, in an Active Management Area, A.R.S. § 45-454 only allows non-irrigation uses for "exempt" wells. If the proposed use includes the growing of 2 or more acres of plants for sale or human/animal consumption (irrigation use), the well does not qualify as an exempt well.
6. An exempt well, referred to in Item 10, means a well with a pump with a maximum capacity of not more than thirty-five gallons per minute and used for non-irrigation purposes.
7. For item 11, in an Active Management Area, A.R.S. § 45-454 allow up to 56 acre feet per year of pumping from a domestic (residential) or stock watering exempt well, and up to 10 acre ft per year from an exempt well used for other (usually commercial non-irrigation) purposes.
8. If any water from a proposed well on a parcel of twenty or fewer acres will be used for domestic purposes, as defined in § 45-454, the applicant must submit a well site plan of the property. The plan must be on an 8½" x 11" piece of plain paper with representation of the locations of all structures and proximity of adjacent lot lines, to scale. It must include the county assessor's parcel identification number. The plan must show the proposed well location and the location of any septic tank or sewer system that is either located on the property or within one hundred feet of the proposed well site, as well as indicating the measured shortest distance between the proposed well and existing septic tank system. **The plan must demonstrate that the well will not be drilled within one hundred feet of any septic or sewer system.**
9. The site plan must be approved by the county health authority, or by a local health authority in areas where the county health authority has delegated authority to approve septic or sewer systems. Endorsement by the county/local authority is based solely on the best available judgement that the proposed well, as shown on the site plan submitted, is 100 feet or more from all known and visually identifiable sewage treatment systems. It is not a representation that a well placed at this site will be guaranteed as to quantity or quality. In areas where there is no local or county authority that controls installation of septic tanks or sewer systems, or if the health authority is unable to determine whether the proposed well location complies with state and local requirements, the applicant must apply for approval directly to the Department of Water Resources.
10. If an individual other than the land owner or lessee signs this notice, an original letter of authorization from the land owner/lessee, stating that the individual has permission to sign this specific notice on his or her behalf, must accompany the notice.
11. Please mail **two original Notices with original signatures and two site plans** and, in accordance with A.R.S. § 45-113, a **check or money order (no cash) in the amount of \$10.00** to P. O. Box 458, Phoenix Arizona, 85001-0458, or hand deliver to 500 North Third Street, Phoenix, Arizona.
12. Arizona Revised Statute § 45-596(D) provides that the Director of the Department is to determine whether or not all information required on this form has been submitted. If not, the person filing the Notice will be notified, and the drilling or modification of the well may **not** proceed.
13. This form is not applicable for non-exempt wells (those yielding more than thirty-five gallons per minute) within an Active Management Area. Contact Groundwater Management for further information regarding the appropriate notice to file with the Department.

TIME FRAME FOR REVIEW OF YOUR APPLICATION

Within 15 days after receipt of your Notice of Intent the Arizona Department of Water Resources ("Department") will determine whether your application should be granted or denied, unless this time is extended for lack of a complete application. If your application is incomplete, the Department will notify you in writing and will specify what information is necessary to make the application complete. Until the missing information is received, the time frame for review of your application will be suspended. Your application will not be complete until all of the requested information is received. If you do not supply the missing information within sixty (60) days, the Department may deem your application withdrawn and close the file.

At the end of its review, the Department will send you a written notice either granting or denying your application for drilling authority. If your application is approved, the Drill Card will be mailed directly to the drilling contractor. If denied, the Department's notice will state justification for the denial and an explanation of your right to appeal.

CONSTRUCTION AND FOLLOW UP REQUIREMENTS

1. Construction and abandonment standards for wells, must be in accordance with Department Regulations. A.R.S. § 45-594 and Arizona Administrative Code R12-15-811 require the well to be constructed with a twenty foot steel surface seal casing, including a one foot steel stickup and one and one-half inches of grout seal around the casing from the surface to a depth of twenty feet, unless a variance is granted (**see A.R.S. § 45-596 (G) for procedure to follow in requesting a variance**).
2. Pursuant to § 45-596(E), the drilling, deepening or modification of the well must be completed within one year of the date of the Notice of Intent. If the well is not completed within one year, a new Notice of Intent must be filed before proceeding with further construction.
3. If a well which was originally drilled as an exploration well, a monitor well, a piezometer well or for any use other than domestic use is later proposed to be converted to use for domestic purposes as defined in § 45-454, the well owner must file a Notice of Intent to Drill and comply with the requirements of § 45-596 before the well is converted and any water from that well is used for domestic purposes.
4. Within thirty days after installation of pumping equipment, the registered well owner must file a Completion Report with the Department. The person to whom a well is registered also must notify the Department of a change in ownership or a change in data relating to this well.

**ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION
MAIL TO: P. O. BOX 458, PHOENIX, ARIZONA 85001-0458
FOR MORE INFORMATION CALL: MONICA ORTIZ 602-417-2470
NOTICE OF INTENTION TO DRILL, DEEPEN, REPLACE OR MODIFY A WELL**

PLEASE COMPLETE ALL ITEMS IN THE BOX BELOW DOWN TO COUNTY OR LOCAL AUTHORITY ENDORSEMENT. IF WATER FROM THE PROPOSED WELL (LISTED BELOW) WILL BE USED FOR DOMESTIC PURPOSES ON A PARCEL OF LAND 20 OR FEWER ACRES, THE APPLICABLE COUNTY OR LOCAL HEALTH AUTHORITY MUST ENDORSE ALL ITEMS IN THE BOX BEFORE SUBMISSION TO THE DEPARTMENT OF WATER RESOURCES. ITEMS C, D, E, AND F MAY BE AVAILABLE FROM YOUR COUNTY ASSESSOR'S OFFICE.

A. LANDOWNER'S NAME _____ CURRENT MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____

B. TELEPHONE NO. _____ COUNTY ASSESSOR'S PARCEL ID INFORMATION _____

C. WELL LOCATED IN _____ COUNTY D. _____ E. _____ OFFICIAL SEAL OR STAMP

BOOK _____ MAP _____ PARCEL _____ # OF ACRES _____

WELL/LAND LOCATION (MUST BE COMPLETED AS REQUESTED)

F. 1/4 _____ 1/4 _____ 1/4 _____ OF SECTION _____ TOWNSHIP _____ N/S _____ RANGE _____ E/W _____

10AC _____ 40AC _____ 160AC _____ COUNTY OR LOCAL AUTHORITY ENDORSEMENT _____

CHECK ONE
G. RECOMMEND APPROVAL _____, INSUFFICIENT INFORMATION TO MAKE A DETERMINATION _____, VARIANCE REQUIRED _____ (EXPLANATION ATTACHED)

H. DATE _____ AUTHORIZED SIGNATURE _____ TITLE _____

1. OWNER OF WELL:

NAME _____

CURRENT MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE NUMBER _____

2. ACTION REQUESTED:

DRILL NEW WELL _____ DEEPEN _____

MODIFY _____ REPLACE _____

WELL REGISTRATION NO 55- _____

FOR A REPLACEMENT WELL PROVIDE
MAX CAPACITY OF THE ORIGINAL WELL
_____ GALLONS PER MINUTE,

DISTANCE FROM THE ORIGINAL WELL:
_____ FEET

3. CONSTRUCTION WILL START ABOUT:
MONTH _____ YEAR _____

4. TYPE OF CASING FOR PROPOSED WELL
SURFACE CASING:
DIAMETER _____ " DEPTH _____ '

DOWNHOLE CASING
DIAMETER _____ " DEPTH _____ '

5. DESIGN PUMP CAPACITY
_____ GALLONS PER MINUTE

6. LESSEE OF LAND OF WELLSITE:

NAME _____

CURRENT MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____

7. PRINCIPAL USE OF WATER (BE SPECIFIC)

8. OTHER USES OF WATER (BE SPECIFIC)

FOR DEPARTMENT USE ONLY

REGISTRATION NO 55- _____

DATE FILED _____

FILE NO _____

AMA/INA _____

W/S _____ S/B _____

PROCESSED BY _____

DATE MAILED _____

9. PLACE OF USE (LEGAL DESCRIPTION OF LAND):

1/4 _____ 1/4 _____ 1/4 _____ SECTION _____

10AC _____ 40AC _____ 160AC _____

TWNSHP _____ N/S _____ RNG _____ E/W _____

10. TYPE OF WELL (CHECK ONE)

EXEMPT _____ NON-EXEMPT _____

11. CHECK ONE:

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OTHER _____

12. IS THE PROPOSED WELLSITE WITHIN 100 FEET OF A SEPTIC TANK SYSTEM, SEWER DISPOSAL AREA, LANDFILL, HAZARDOUS MATERIALS OR PETROLEUM STORAGE AREAS AND TANKS?

YES _____ NO _____

13. DRILLING FIRM:

NAME _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE NO _____

DWR LICENSE NUMBER _____

ROC LICENSE CATEGORY _____

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14. TYPE OR PRINT NAME AND TITLE

15. SIGNATURE OF LANDOWNER/LESSEE OF WELLSITE

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A. LANDOWNER'S NAME _____ CURRENT MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____

B TELEPHONE NO. _____ - _____ - _____ COUNTY ASSESSOR'S PARCEL ID INFORMATION _____

C WELL LOCATED IN _____ COUNTY D _____ BOOK _____ MAP _____ PARCEL _____ E _____ # OF ACRES _____ OFFICIAL SEAL OR STAMP _____

WELL/LAND LOCATION (MUST BE COMPLETED AS REQUESTED)

F _____ 1/4 _____ 1/4 _____ 1/4 OF SECTION _____ TOWNSHIP _____ N/S _____ RANGE _____ E/W _____
10AC 40AC 160AC COUNTY OR LOCAL AUTHORITY ENDORSEMENT _____

CHECK ONE
G RECOMMEND APPROVAL _____, INSUFFICIENT INFORMATION TO MAKE A DETERMINATION _____, VARIANCE REQUIRED _____ (EXPLANATION ATTACHED) _____

H DATE _____ AUTHORIZED SIGNATURE _____ TITLE _____

1. OWNER OF WELL

NAME _____

CURRENT MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE NUMBER _____ - _____ - _____

2. ACTION REQUESTED

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MODIFY _____ REPLACE _____

WELL REGISTRATION NO 55- _____

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3. CONSTRUCTION WILL START ABOUT:

MONTH _____ YEAR _____

4. TYPE OF CASING FOR PROPOSED WELL

SURFACE CASING
DIAMETER: _____ " DEPTH: _____'

DOWNHOLE CASING
DIAMETER: _____ " DEPTH: _____'

5. DESIGN PUMP CAPACITY

_____ GALLONS PER MINUTE

6. LESSEE OF LAND OF WELLSITE

NAME _____

CURRENT MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____ - _____ - _____

7. PRINCIPAL USE OF WATER (BE SPECIFIC)

8. OTHER USES OF WATER (BE SPECIFIC).

9. PLACE OF USE (LEGAL DESCRIPTION OF LAND):

_____ 1/4 _____ 1/4 _____ 1/4 SECTION _____
10AC 40AC 160AC
TWNSHP _____ N/S _____ RNG _____ E/W _____

10. TYPE OF WELL (CHECK ONE):

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11. CHECK ONE:

RESIDENTIAL _____ STOCKWATER _____
OTHER _____

12. IS THE PROPOSED WELLSITE WITHIN 100 FEET OF A SEPTIC TANK SYSTEM, SEWER DISPOSAL AREA, LANDFILL, HAZARDOUS MATERIALS OR PETROLEUM STORAGE AREAS AND TANKS?

YES _____ NO _____

13. DRILLING FIRM

NAME _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE NO. _____

DWR LICENSE NUMBER _____

ROC LICENSE CATEGORY _____

FOR DEPARTMENT USE ONLY

REGISTRATION NO 55- _____

DATE FILED _____

FILE NO. _____

AMA/INA _____

W/S _____ S/B _____

PROCESSED BY _____

DATE MAILED _____

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7. For item 11, in an Active Management Area, A.R.S. § 45-454 allow up to 56 acre feet per year of pumping from a domestic (residential) or stock watering exempt well, and up to 10 acre ft per year from an exempt well used for other (usually commercial non-irrigation) purposes.
8. If any water from a proposed well on a parcel of twenty or fewer acres will be used for domestic purposes, as defined in § 45-454, the applicant must submit a well site plan of the property. The plan must be on an 8½" x 11" piece of plain paper with representation of the locations of all structures and proximity of adjacent lot lines, to scale. It must include the county assessor's parcel identification number. The plan must show the proposed well location and the location of any septic tank or sewer system that is either located on the property or within one hundred feet of the proposed well site, as well as indicating the measured shortest distance between the proposed well and existing septic tank system. **The plan must demonstrate that the well will not be drilled within one hundred feet of any septic or sewer system.**
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13. This form is not applicable for non-exempt wells (those yielding more than thirty-five gallons per minute) within an Active Management Area. Contact Groundwater Management for further information regarding the appropriate notice to file with the Department.

TIME FRAME FOR REVIEW OF YOUR APPLICATION

Within 15 days after receipt of your Notice of Intention the Arizona Department of Water Resources ("Department") will determine whether your application should be granted or denied, unless this time is extended for lack of a complete application. If your application is incomplete, the Department will notify you in writing and will specify what information is necessary to make the application complete. Until the missing information is received, the time frame for review of your application will be suspended. Your application will not be complete until all of the requested information is received. If you do not supply the missing information within sixty (60) days, the Department may deem your application withdrawn and close the file.

At the end of its review, the Department will send you a written notice either granting or denying your application for drilling authority. If your application is approved, the Drill Card will be mailed directly to the drilling contractor. If denied, the Department's notice will state justification for the denial and an explanation of your right to appeal.

CONSTRUCTION AND FOLLOW UP REQUIREMENTS

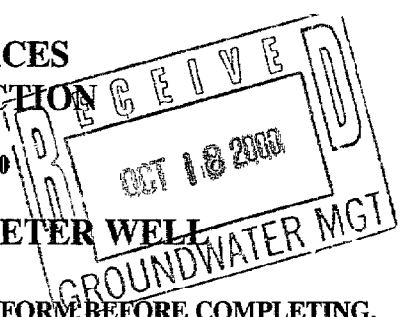
1. Construction and abandonment standards for wells, must be in accordance with Department Regulations. A.R.S. § 45-594 and Arizona Administrative Code R12-15-811 require the well to be constructed with a twenty foot steel surface seal casing, including a one foot steel stickup and one and one-half inches of grout seal around the casing from the surface to a depth of twenty feet, unless a variance is granted (see A.R.S. § 45-596 (G) for procedure to follow in requesting a variance).
2. Pursuant to § 45-596(E), the drilling, deepening or modification of the well must be completed within one year of the date of the Notice of Intent. If the well is not completed within one year, a new Notice of Intent must be filed before proceeding with further construction.
3. If a well which was originally drilled as an exploration well, a monitor well, a piezometer well or for any use other than domestic use is later proposed to be converted to use for domestic purposes as defined in § 45-454, the well owner must file a Notice of Intention to Drill and comply with the requirements of § 45-596 before the well is converted and any water from that well is used for domestic purposes.
4. Within thirty days after installation of pumping equipment, the registered well owner must file a Completion Report with the Department. The person to whom a well is registered also must notify the Department of a change in ownership or a change in data relating to this well.

ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION

MAIL TO: P.O. BOX 458, PHOENIX, ARIZONA 85001-0458
FOR INFORMATION: CALL MONICA ORTIZ AT 602-417-2470

NOTICE OF INTENTION TO DRILL MONITOR/PIEZOMETER WELL

PLEASE READ GENERAL INSTRUCTIONS AND CONDITIONS ON REVERSE SIDE OF THIS FORM BEFORE COMPLETING.



1. Well/Land Location:

2 NS 4 EW 26
Township Range Section
NE 1/4 SE 1/4 SW 1/4
10 Acre 40 Acre 160 Acre

2. Position location of the well on the land:

Latitude 33 ° 29 ' 0 "
Longitude 111 ° 55 ' 1 "

3. County: Maricopa

4. Owner of the well:

SMI Holdings, LLC.
Name
153 E. 53rd Street
Mailing Address
New York New York 10022-4611
City State Zip
Telephone No. 212-258-4419

5. Lessee of the land of wellsite:

SMI Holdings, LLC.
Name
153 E 53rd Street
Mailing Address
New York, New York 10022-4611
City State Zip
Telephone No. 212-258-4419

6. Owner of the Land of Wellsite:

Banner Health System
Name
7575 East Earll Drive
Mailing Address
Scottsdale Az. 85251
City State Zip

Telephone No. 480-941-7525

7. Consulting firm:

LPR Levine-Fricke
Name
Marshall Brown
Contact Person

Telephone No. 480-905-9311

8. Purpose of well drilled pursuant to this notice:

Monitor 6" dia production well
Piezometer

9. If for deepening or modifying, list well registration number:
55- Not applicable

* FOR DEPARTMENT USE ONLY
File No. A(2-4)26 CDA
Filed By
Input By
DUPLICATE
Mailed By
Registration 55-583962
AMA/INA PW
W/S 07 S/B 06
no. C-02

10. Will this proposed well be associated with a permit: Yes No X
If yes, Permit No.

11. Construction will start:

October 30 2000
Month Day Year

12. Period well will remain in use:

Indefinite Months/Years

13. For monitoring wells, is pump equipment to be installed?

Yes X No

(a) If yes, design pump capacity:

200 gpm

(b) What use will be made of the water:

treatment of middle alluvial aquifer water reinject into upper alluvial aquifer

14. Drilling Firm:

Layne Christensen Co.
Name
12030 E. Riggs Road
Mailing Address
Chandler AZ. 85249
City State Zip
480-895-9336
Telephone No.
473
DWR License Number
A-4
ROC License Category

15. Proposed method of abandonment of well after project is completed: In accordance with applicable Arizona

Department of Water Resources Regulations, pursuant to R12-15-816.

16. Is this well to monitor existing contamination? Yes Potential contamination: Please explain Production well to remove water containing trichloroethene (TCE) Reinject treated water

17. If construction plans have been coordinated with Arizona Department of Environmental Quality, who is the agency contact?

18. If construction plans have been coordinated with Arizona Department of Water Resources, who is the agency contact?

19. WELL CONSTRUCTION PLAN:

- a) Drilling method (mud rotary, hollow-stem auger, etc.) Ingersoll Rand THGO (Air Rotary Casing hammer)
- b) Borehole diameters: 10 3/4 inches from 0 feet to 355 feet.
 inches from _____ feet to _____ feet
- c) Casing materials (PVC, steel, hollow-stem auger, etc.)
 material Stainless Steel diameter 6 inches from 0 feet to 170 feet.
 material Stainless Steel diameter 6 inches from 170 feet to 350 feet.
Screen
- d) Method of sealing at reductions _____
- e) Annular seal materials (cement, grout, etc.); method of placement (tremied, circulated):
 material Neat Cement Grout method Tremie from 0 feet to 155 feet
 material Bentonite Pellet method Pour from surface from 155 feet to 160 feet
- f) Filter packs (state material):
 material No. 8/12 CSSI from 160 feet to 350 feet
 material 0.020" wire wrapped from 165 feet to 350 feet
- g) Perforations or screen specifications:
 Type _____ from _____ feet to _____ feet.
 Type _____ from _____ feet to _____ feet.
- h) Method of well development (bail, air lift, surge) Bail and surge pump
- i) Will surface or conductor casing extend above grade?: Yes _____ No X

20. Include detailed construction diagram showing expected water depth in feet below land surface, and details of vault, if specified.

I state that this Notice is filed in compliance with Rule A.A.C. R12-15-809, is complete and correct to the best of my knowledge and belief and that I understand the conditions set forth on this form.

David Stryker, Secretary & General Counsel DS 16 Oct. 2000
 Typed or Printed Name and Title Signature [] Land Owner ☒ Lessee of Wellsite, Title Date

Necessary Steps and Instructions to Obtain Drilling Authority (Monitor/Piezometer Wells)

1. Arizona Revised Statutes ("A.R.S.") § 45-596 provides that prior to drilling a monitor or piezometer well, a Notice of Intention to Drill must be filed with the Department. To assist you in understanding the substantive requirements for this application, copies of A.R.S. § 45-596 and Arizona Administrative Code ("A.A.C.") R12-15-810 are available thru the department bookstore.
2. Information to complete items 1, 2, and 3 may be available from your County Tax Receipt or your County Assessors Office
3. Information to complete item 9 is available from your copy of the original Notice of Intent to Drill or our Records Division at (602)417-2405
4. Information to complete items 11, 14 and 15 may be available from your driller.
5. If an individual other than the land owner or lessee signs this notice, an original **notarized** letter of authorization from the land owner/lessee, stating that the individual has permission to sign this specific Notice on his or her behalf, must accompany the Notice of Intention to Drill a Monitor/Piezometer Well
6. Please complete two original notices with original signatures and include a \$10.00 check or money order for the processing fee in accordance with A.R.S. § 45-113. Submit them to: P.O. Box 458, Phoenix, Arizona 85001-0458.

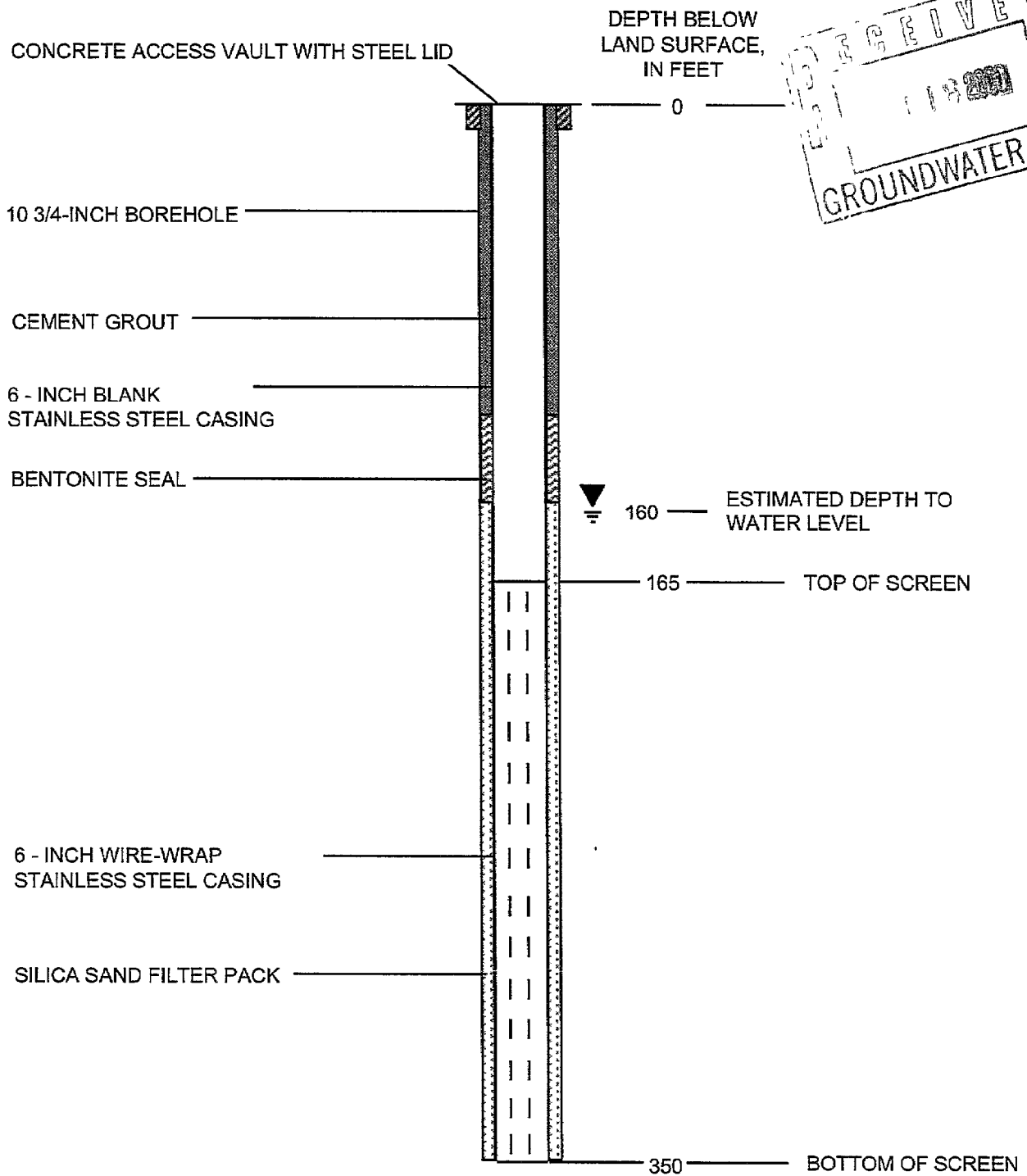
TIME FRAME FOR REVIEW OF YOUR APPLICATION

Within 15 days after receipt of your Notice of Intention, the Arizona Department of Water Resources ("Department") will determine whether your application should be granted or denied, unless this time is extended for lack of a complete application. If your application is incomplete, the Department will notify you in writing and will specify what information is necessary to make the application complete. Until the missing information is received, the time frame for review of your application will be suspended. Your application will not be complete until all of the requested information is received. If you do not supply the missing information within sixty (60) days, the Department may deem your application withdrawn and close the file.

At the end of its review, the Department will send you written notice either granting or denying your application for drilling authority. If your application is approved, the Drill Card will be mailed directly to the drilling company. If denied, the Department's notice will state justification for the denial and an explanation of your right to appeal.

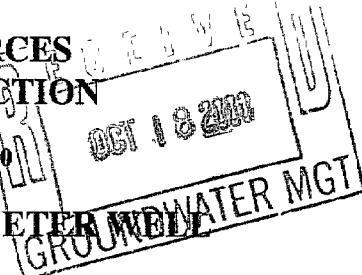
Construction and Follow-up Requirements

1. Construction and abandonment standards for all wells must be in accordance with Department Rules.
2. A.A.C. Rule R12-15-811(H)(2) requires a monitor well to be identified as such on the vault cover or at the top of the steel casing. Identification information must include the well registration number.
3. Pursuant to A.R.S. § 45-596(E), drilling, deepening or modification of the well must be completed within one year after the date of the Notice of Intent
4. A Well Driller Report is required within thirty (30) days of completion of drilling. Within thirty (30) days after installation of pumping equipment in monitor wells, a Completion Report must be filed with the Department.
5. Pump equipment may not be installed on a well drilled for piezometer purposes. If a monitor well is pumped, pumping is limited to the maximum amount required for monitor purposes, but in no case may exceed 35 gallons per minute and an annual total volume of 10 acre feet.
6. Special construction standards required pursuant to A.A.C. Rule R12-15-821: _____



ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION

MAIL TO: P.O. BOX 458, PHOENIX, ARIZONA 85001-0458
FOR INFORMATION: CALL MONICA ORTIZ AT 602-417-2470



NOTICE OF INTENTION TO DRILL MONITOR/PIEZOMETER WELL

PLEASE READ GENERAL INSTRUCTIONS AND CONDITIONS ON REVERSE SIDE OF THIS FORM BEFORE COMPLETING.

1. Well/Land Location:

2 (NS) 4 (B/W) 26
Township Range Section
NE 1/4 SE 1/4 SW 1/4
10 Acre 40 Acre 160 Acre

2. Position location of the well on the land:

Latitude 33 ° 29 ' 0 "
Longitude 111 ° 55 ' 1 "

3. County: Maricopa

4. Owner of the well:

SMI Holdings, LLC.
Name
153 E. 53rd Street
Mailing Address
New York New York 10022-4611
City State Zip
Telephone No. 212-258-4419

5. Lessee of the land of wellsite:

SMI Holdings, LLC.
Name
153 E. 53rd Street
Mailing Address
New York, New York 10022-4611
City State Zip
Telephone No. 212-258-4419

6. Owner of the Land of Wellsite:

Banner Health System
Name
7575 East Earll Drive
Mailing Address
Scottsdale, Az. 85251
City State Zip
Telephone No. 480-941-7525

7. Consulting firm:

LFR Levine-Fricke
Name
Marshall Brown
Contact Person
Telephone No. 480-905-9311

8. Purpose of well drilled pursuant to this notice:

Monitor 6" dia production well
Piezometer

9. If for deepening or modifying, list well registration number:

55- Not applicable

10. Will this proposed well be associated with a permit: Yes _____ No X

If yes, Permit No. _____

11. Construction will start:

October 30 2000
Month Day Year

12. Period well will remain in use:

Indefinite Months/Years

13. For monitoring wells, is pump equipment to be installed?

Yes X No _____

(a) If yes, design pump capacity:

200 gpm

(b) What use will be made of the water:

treatment of middle alluvial aquifer water reinject into upper alluvial aquifer

14. Drilling Firm:

Layne Christensen Co.

Name
12030 E. Riggs Road
Mailing Address
Chandler, Ariz. 85249
City State Zip
480-895-9336
Telephone No.
473
DWR License Number
A-4
ROC License Category

* FOR DEPARTMENT USE ONLY	
File No. <u>A(2-4)26 CDA</u>	
Filed _____ By _____	
Input _____ By _____	
DUPLICATE	
Mailed _____ By _____	
Registration <u>55-583962</u>	
AMA/INA <u>Phx</u>	
W/S <u>07</u> S/B <u>06</u>	

C-02

15. Proposed method of abandonment of well after project is completed: In accordance with applicable Arizona Department of Water Resources Regulations pursuant to R12-15-816.

16. Is this well to monitor existing contamination? Yes Potential contamination: _____ Please explain: Production well to remove water containing trichloroethene TCE Reinject treated water

17. If construction plans have been coordinated with Arizona Department of Environmental Quality, who is the agency contact? _____

18. If construction plans have been coordinated with Arizona Department of Water Resources, who is the agency contact? _____

19. WELL CONSTRUCTION PLAN:

- a) Drilling method (mud rotary, hollow-stem auger, etc.) Ingersoll THGO (Air Rotary Casing Hammer)
- b) Borehole diameters: 10 3/4 inches from 0 feet to 355 feet.
inches from _____ feet to _____ feet.
- c) Casing materials (PVC, steel, hollow-stem auger, etc.)
material Stainless Steel diameter 6 inches from 0 feet to 170 feet.
material Stainless Steel diameter 6 inches from 170 feet to 350 feet
Screen
- d) Method of sealing at reductions _____
- e) Annular seal materials (cement, grout, etc.); method of placement (tremied, circulated):
material Neat Cement Grout method Tremie from 0 feet to 155 feet.
material Benetonite Pellet method Pour from surface from 155 feet to 160 feet.
- f) Filter packs (state material):
material No. 8/12 CSSI from 160 feet to 350 feet.
material 0.020" wire wrapped from 165 feet to 350 feet.
- g) Perforations or screen specifications:
Type _____ from _____ feet to _____ feet.
Type _____ from _____ feet to _____ feet.
- h) Method of well development (bail, air lift, surge) bail and surge pump
- i) Will surface or conductor casing extend above grade?: Yes _____ No X _____

20. Include detailed construction diagram showing expected water depth in feet below land surface, and details of vault, if specified.

I state that this Notice is filed in compliance with Rule A.A.C. R12-15-809, is complete and correct to the best of my knowledge and belief and that I understand the conditions set forth on this form.

David Stryker, Secretary & General Counsel

Typed or Printed Name and Title

Signature [] Land Owner X Lessee of Wellsite, Title

Date

16 Oct 2000

Necessary Steps and Instructions to Obtain Drilling Authority (Monitor/Piezometer Wells)

- 1 Arizona Revised Statutes ("A.R.S.") § 45-596 provides that prior to drilling a monitor or piezometer well, a Notice of Intention to Drill must be filed with the Department. To assist you in understanding the substantive requirements for this application, copies of A.R.S. § 45-596 and Arizona Administrative Code ("A.A.C.") R12-15-810 are available thru the department bookstore.
- 2 Information to complete items 1, 2, and 3 may be available from your County Tax Receipt or your County Assessors Office.
- 3 Information to complete item 9 is available from your copy of the original Notice of Intent to Drill or our Records Division at (602)417-2405
- 4 Information to complete items 11, 14 and 15 may be available from your driller.
- 5 If an individual other than the land owner or lessee signs this notice, an original **notarized** letter of authorization from the land owner/lessee stating that the individual has permission to sign this specific Notice on his or her behalf, must accompany the Notice of Intention to Drill a Monitor/Piezometer Well
- 6 Please complete two original notices with original signatures and include a \$10.00 check or money order for the processing fee, in accordance with A.R.S. § 45-113. Submit them to: P.O. Box 458, Phoenix, Arizona 85001-0458.

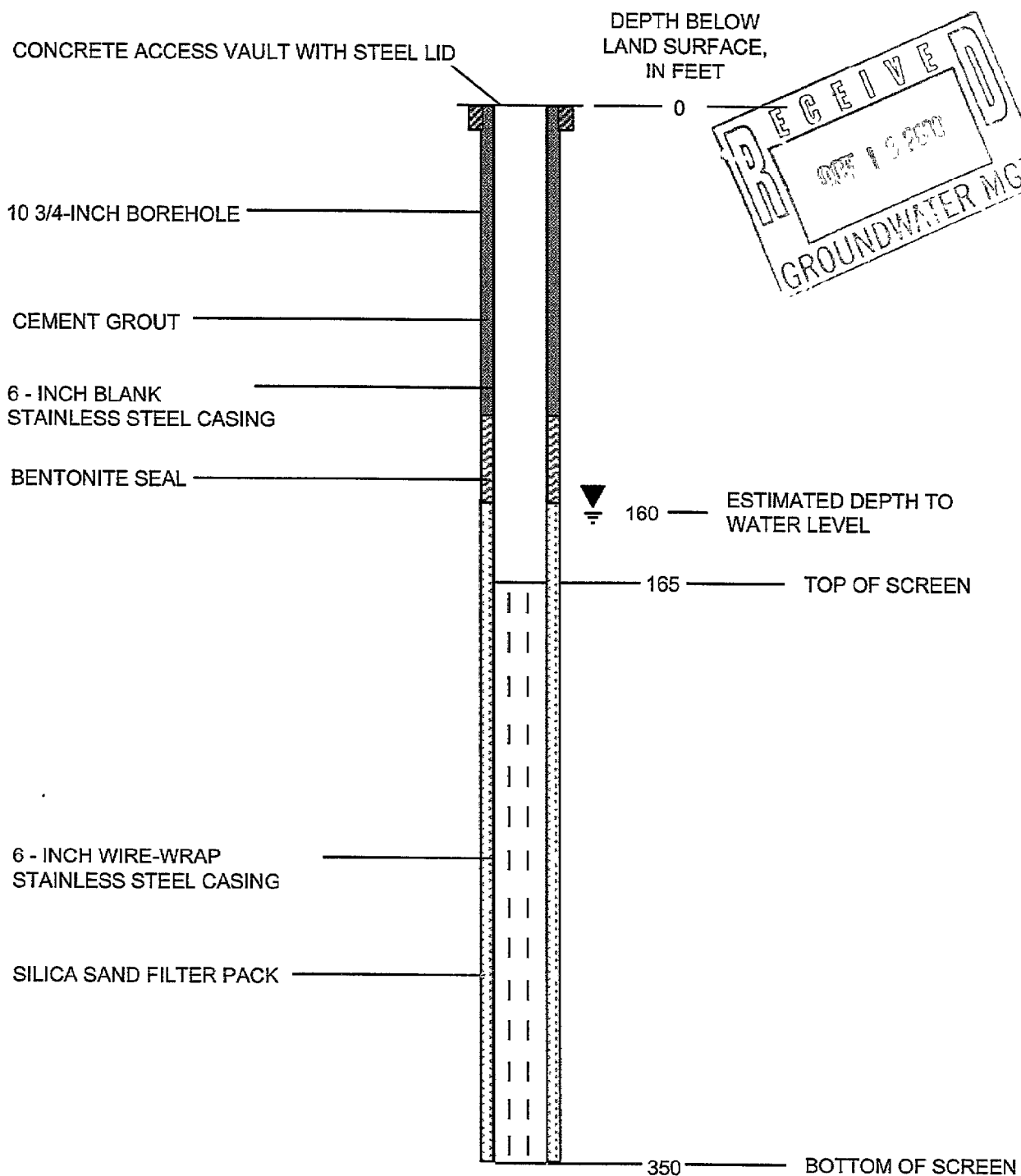
TIME FRAME FOR REVIEW OF YOUR APPLICATION

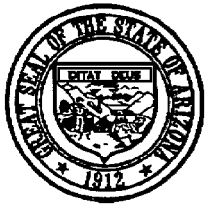
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At the end of its review, the Department will send you written notice either granting or denying your application for drilling authority. If your application is approved, the Drill Card will be mailed directly to the drilling company. If denied, the Department's notice will state justification for the denial and an explanation of your right to appeal.

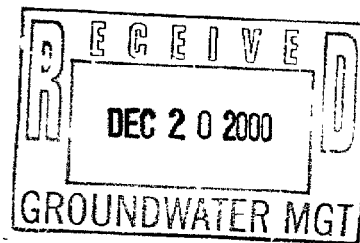
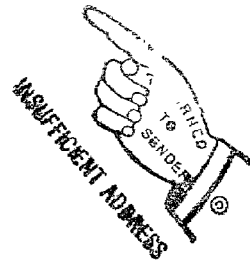
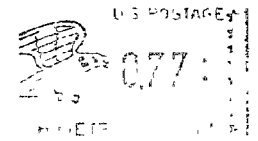
Construction and Follow-up Requirements

1. Construction and abandonment standards for all wells must be in accordance with Department Rules
2. A.A.C. Rule R12-15-811(H)(2) requires a monitor well to be identified as such on the vault cover or at the top of the steel casing. Identification information must include the well registration number.
3. Pursuant to A.R.S. § 45-596(E), drilling, deepening or modification of the well must be completed within one year after the date of the Notice of Intent
4. A Well Driller Report is required within thirty (30) days of completion of drilling. Within thirty (30) days after installation of pumping equipment in monitor wells, a Completion Report must be filed with the Department.
5. Pump equipment may not be installed on a well drilled for piezometer purposes. If a monitor well is pumped, pumping is limited to the maximum amount required for monitor purposes, but in no case may exceed 35 gallons per minute and an annual total volume of 10 acre feet
6. Special construction standards required pursuant to A.A.C. Rule R12-15-821: _____

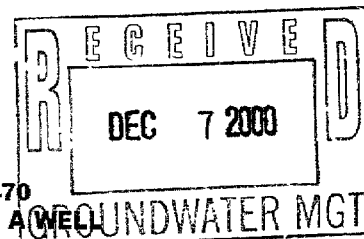




**Arizona Department
of Water Resources**
500 North 3rd Street
Phoenix, Arizona 85004-3903



**ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION
MAIL TO: P. O. BOX 458, PHOENIX, ARIZONA 85001-0458
FOR MORE INFORMATION CALL: MONICA ORTIZ 602-417-2470
NOTICE OF INTENTION TO DRILL, DEEPEN, REPLACE OR MODIFY A**



PLEASE COMPLETE ALL ITEMS IN THE BOX BELOW DOWN TO COUNTY OR LOCAL AUTHORITY ENDORSEMENT. IF WATER FROM THE PROPOSED WELL (LISTED BELOW) WILL BE USED FOR DOMESTIC PURPOSES ON A PARCEL OF LAND 20 OR FEWER ACRES, THE APPLICABLE COUNTY OR LOCAL HEALTH AUTHORITY MUST ENDORSE ALL ITEMS IN THE BOX BEFORE SUBMISSION TO THE DEPARTMENT OF WATER RESOURCES. ITEMS C, D, E, AND F MAY BE AVAILABLE FROM YOUR COUNTY ASSESSOR'S OFFICE.

A. BANNER HEALTH SYSTEM 7575 EAST EARL DRIVE SCOTTSDALE AZ 85251
LANDOWNER'S NAME CURRENT MAILING ADDRESS CITY STATE ZIP

B. TELEPHONE NO 480-941-7525 COUNTY ASSESSOR'S PARCEL ID INFORMATION:

C. WELL LOCATED IN MARICOPA COUNTY D MCL 169 29 13019028A+B E 6.3
BOOK MAP PARCEL # OF ACRES OFFICIAL SEAL OR STAMP

WELL/LAND LOCATION (MUST BE COMPLETED AS REQUESTED)

F NE 1/4 SE 1/4 SW 1/4 OF SECTION 26 TOWNSHIP 2 N S RANGE 4 E W
10AC 40AC 160AC COUNTY OR LOCAL AUTHORITY ENDORSEMENT

CHECK ONE:
G RECOMMEND APPROVAL _____, INSUFFICIENT INFORMATION TO MAKE A DETERMINATION _____, VARIANCE REQUIRED _____ (EXPLANATION ATTACHED)

H. DATE _____ AUTHORIZED SIGNATURE _____ TITLE _____

1. OWNER OF WELL:
SMT HOLDINGS, LLC
NAME
153 E. 53rd STREET
CURRENT MAILING ADDRESS
NEW YORK NEW YORK 10022-4611
CITY STATE ZIP

TELEPHONE NUMBER 212-258-4419

2. ACTION REQUESTED
DRILL NEW WELL ☒ DEEPEN
MODIFY ☐ REPLACE

WELL REGISTRATION NO 55-583962

FOR A REPLACEMENT WELL PROVIDE:
MAX CAPACITY OF THE ORIGINAL WELL
NA GALLONS PER MINUTE;

DISTANCE FROM THE ORIGINAL WELL:
NA FEET

3. CONSTRUCTION WILL START ABOUT:
MONTH 12 YEAR 2000

4. TYPE OF CASING FOR PROPOSED WELL:
SURFACE CASING: STAINLESS STEEL
DIAMETER: 6" DEPTH: 350'

DOWNHOLE CASING: STAINLESS STEEL
DIAMETER: 6" DEPTH: _____

5. DESIGN PUMP CAPACITY:
150 GALLONS PER MINUTE

6. LESSEE OF LAND OF WELL SITE:
SMT HOLDINGS, LLC
NAME
153 E. 53rd STREET
CURRENT MAILING ADDRESS
NEW YORK NEW YORK 10022-4611
CITY STATE ZIP

TELEPHONE: 212-258-4419

7. PRINCIPAL USE OF WATER: (BE SPECIFIC)
PRODUCTION WELL TO REMOVE WATER
CONTAINING TRICHLOROETHENE (TCE)
8. OTHER USES OF WATER: (BE SPECIFIC)
REINJECT TREATED WATER

* FOR DEPARTMENT USE ONLY
REGISTRATION NO. 55-583962
DATE FILED 12-14-00
FILE NO. A(24)26 CDA
AMA/INA PHOENIX
W/S ST S/B CL
PROCESSED BY DA
DATE MAILED 12-14-00

C-02

9. PLACE OF USE (LEGAL DESCRIPTION OF LAND):
NE 1/4 SE 1/4 SW 1/4 SECTION 26
10AC 40AC 160AC
TWNSH 2 N S RNG 4 E W

10. TYPE OF WELL (CHECK ONE):
EXEMPT ☒ NON-EXEMPT ☐

11. CHECK ONE:
RESIDENTIAL ☐ STOCKWATER ☐
OTHER ☒

12. IS THE PROPOSED WELL SITE WITHIN 100 FEET OF A SEPTIC TANK SYSTEM, SEWER DISPOSAL AREA, LANDFILL, HAZARDOUS MATERIALS OR PETROLEUM STORAGE AREAS AND TANKS?
YES ☐ NO ☒

13. DRILLING FIRM:
LAYNE CHRISTENSEN CO.
NAME
12030 E. RIGGS RD.
MAILING ADDRESS
CHANDLER, AZ 85249
CITY STATE ZIP
480-895-9336
TELEPHONE NO.
480-007
DWR LICENSE NUMBER
A-4
ROC LICENSE CATEGORY

I STATE THAT THIS NOTICE IS FILED IN COMPLIANCE WITH A.R.S. § 45-596, IS COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AND THAT I UNDERSTAND THE LIMITATIONS AND CONDITIONS SET FORTH ON THE REVERSE SIDE OF THIS FORM.

DAVID STRYKER, SECRETARY
14. TYPE OR PRINT NAME AND TITLE
AND GENERAL COUNSEL

15. SIGNATURE OF LANDOWNER/LESSEE OF WELL SITE

1/12/00
16. DATE

APPLICATION GUIDELINES

In accordance with Arizona Revised Statutes ("A.R.S.") §§ 41-1008 and 1079, the Department of Water Resources (Department) provides the following information regarding the application review process for authority to drill.

NECESSARY STEPS & INSTRUCTIONS TO OBTAIN DRILLING AUTHORITY

1. Pursuant to A.R.S. § 45-596, a person may not drill, cause to be drilled, deepen or modify any well for which a permit is not required without first filing a Notice of Intent to Drill with the Department. Only a well drilling contractor licensed in the State of Arizona or a single well licensee (a person licensed to drill or modify one exempt well on his or her own property) is authorized to drill, deepen or modify a well. Drilling may not begin until the well drilling contractor or licensee has possession of a drilling card at the well site, issued by the Director in the name of the well drilling contractor or licensee, and which authorizes the drilling of the specific well in a specific location. To assist you in understanding the requirements for this application, copies of A.R.S. § 45-596 and Arizona Administrative Code ("A.A.C.") R12-15-810 are available at the Department bookstore (602-417-2450 x7127).
2. If replacing, deepening, or modifying an existing well, provide the registration number of the existing well in item 2. A replacement well is one located no more than 660 feet from the original well and that is not expected to annually withdraw more groundwater than historically withdrawn from the original well.
3. Information to complete items 3, 4, 5 and 13 may be available from your driller.
4. Information to complete items 9 and 12 may be available from your County Assessor's Office.
5. For item 10, in an Active Management Area, A.R.S. § 45-454 only allows non-irrigation uses for "exempt" wells. If the proposed use includes the growing of 2 or more acres of plants for sale or human/animal consumption (irrigation use), the well does not qualify as an exempt well.
6. An exempt well, referred to in Item 10, means a well with a pump with a maximum capacity of not more than thirty-five gallons per minute and used for non-irrigation purposes.
7. For item 11, in an Active Management Area, A.R.S. § 45-454 allow up to 56 acre feet per year of pumping from a domestic (residential) or stock watering exempt well, and up to 10 acre ft per year from an exempt well used for other (usually commercial non-irrigation) purposes.
8. If any water from a proposed well on a parcel of twenty or fewer acres will be used for domestic purposes, as defined in § 45-454, the applicant must submit a well site plan of the property. The plan must be on an 8½" x 11" piece of plain paper with representation of the locations of all structures and proximity of adjacent lot lines, to scale. It must include the county assessor's parcel identification number. The plan must show the proposed well location and the location of any septic tank or sewer system that is either located on the property or within one hundred feet of the proposed well site, as well as indicating the measured shortest distance between the proposed well and existing septic tank system. **The plan must demonstrate that the well will not be drilled within one hundred feet of any septic or sewer system.**
9. The site plan must be approved by the county health authority, or by a local health authority in areas where the county health authority has delegated authority to approve septic or sewer systems. Endorsement by the county/local authority is based solely on the best available judgement that the proposed well, as shown on the site plan submitted, is 100 feet or more from all known and visually identifiable sewage treatment systems. It is not a representation that a well placed at this site will be guaranteed as to quantity or quality. In areas where there is no local or county authority that controls installation of septic tanks or sewer systems, or if the health authority is unable to determine whether the proposed well location complies with state and local requirements, the applicant must apply for approval directly to the Department of Water Resources.
10. If an individual other than the land owner or lessee signs this notice, an original letter of authorization from the land owner/lessee, stating that the individual has permission to sign this specific notice on his or her behalf, must accompany the notice.
11. Please mail two original Notices with original signatures and two site plans and, in accordance with A.R.S. § 45-113, a check or money order (no cash) in the amount of \$10.00 to P. O. Box 458, Phoenix Arizona, 85001-0458, or hand deliver to 500 North Third Street, Phoenix, Arizona.
12. Arizona Revised Statute § 45-596(D) provides that the Director of the Department is to determine whether or not all information required on this form has been submitted. If not, the person filing the Notice will be notified, and the drilling or modification of the well may not proceed.
13. This form is not applicable for non-exempt wells (those yielding more than thirty-five gallons per minute) within an Active Management Area. Contact Groundwater Management for further information regarding the appropriate notice to file with the Department.

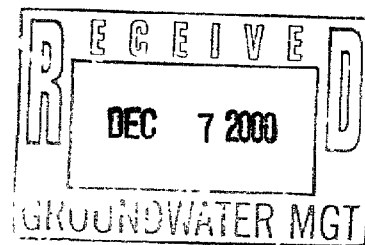
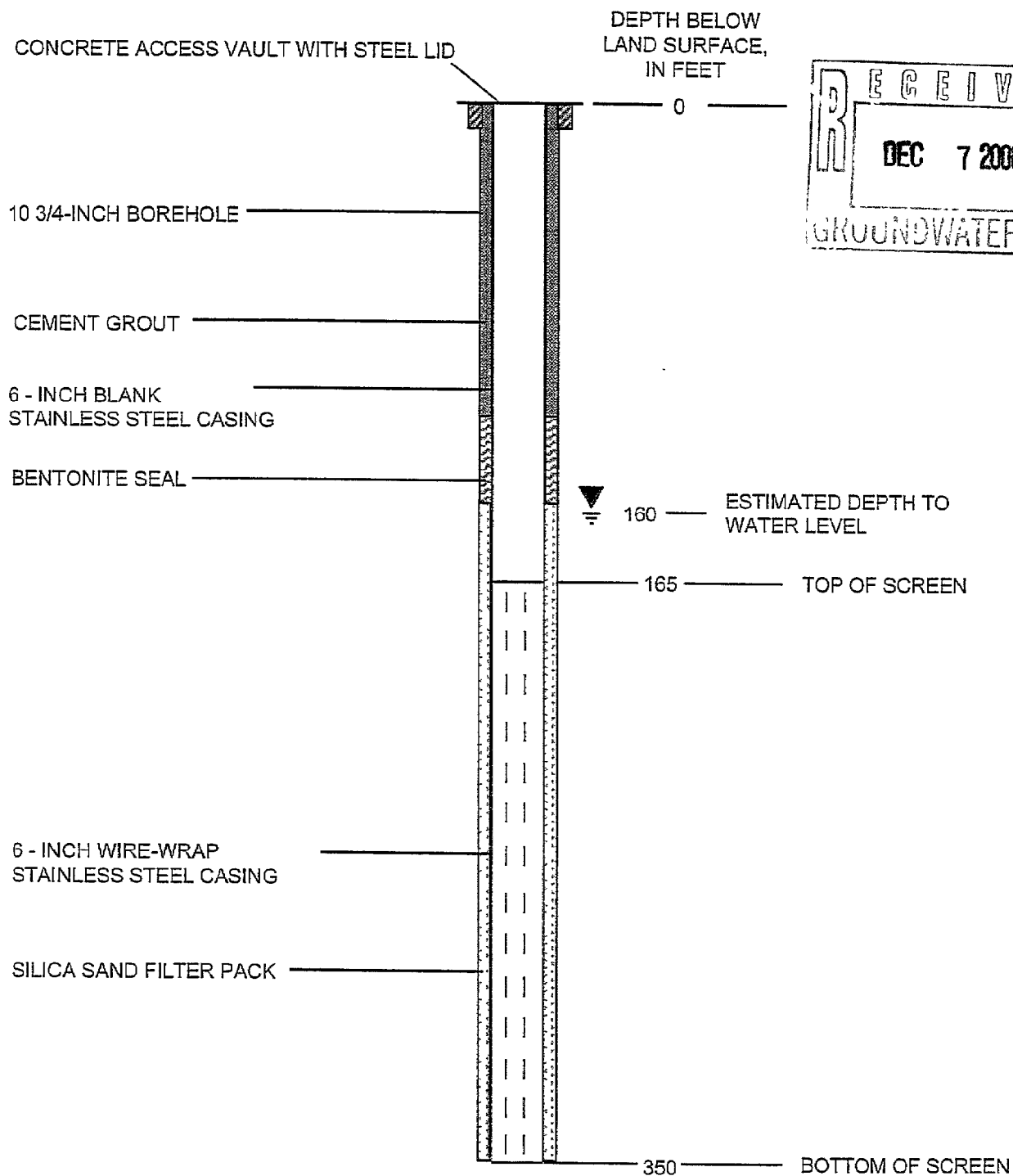
TIME FRAME FOR REVIEW OF YOUR APPLICATION

Within 15 days after receipt of your Notice of Intention the Arizona Department of Water Resources ("Department") will determine whether your application should be granted or denied, unless this time is extended for lack of a complete application. If your application is incomplete, the Department will notify you in writing and will specify what information is necessary to make the application complete. Until the missing information is received, the time frame for review of your application will be suspended. Your application will not be complete until all of the requested information is received. If you do not supply the missing information within sixty (60) days, the Department may deem your application withdrawn and close the file.

At the end of its review, the Department will send you a written notice either granting or denying your application for drilling authority. If your application is approved, the Drill Card will be mailed directly to the drilling contractor. If denied, the Department's notice will state justification for the denial and an explanation of your right to appeal.

CONSTRUCTION AND FOLLOW UP REQUIREMENTS

1. Construction and abandonment standards for wells, must be in accordance with Department Regulations. A.R.S. § 45-594 and Arizona Administrative Code R12-15-811 require the well to be constructed with a twenty foot steel surface seal casing, including a one foot steel stickup and one and one-half inches of grout seal around the casing from the surface to a depth of twenty feet, unless a variance is granted (see A.R.S. § 45-596 (G) for procedure to follow in requesting a variance).
2. Pursuant to § 45-596(E), the drilling, deepening or modification of the well must be completed within one year of the date of the Notice of Intent. If the well is not completed within one year, a new Notice of Intent must be filed before proceeding with further construction.
3. If a well which was originally drilled as an exploration well, a monitor well, a piezometer well or for any use other than domestic use is later proposed to be converted to use for domestic purposes as defined in § 45-454, the well owner must file a Notice of Intention to Drill and comply with the requirements of § 45-596 before the well is converted and any water from that well is used for domestic purposes.
4. Within thirty days after installation of pumping equipment, the registered well owner must file a Completion Report with the Department. The person to whom a well is registered also must notify the Department of a change in ownership or a change in data relating to this well.



ARIZONA DEPARTMENT OF WATER RESOURCES

500 North Third Street, Phoenix, Arizona 85004

Telephone (602) 417-2470

Fax (602) 417-2422

November 17, 2000



SMI HOLDINGS LLC
153 E 53RD ST
NEW YORK NY 10022

Assigned Referenced Number: 55-583962

**PLEASE RETURN
ALL PAPERS**

Dear Applicant:

The Department of Water Resources recently received your Notice of Intent to **Drill, Deepen, Replace, or Modify A Well**. However, our review indicates that the filing(s) is incomplete under the Groundwater Management Act for the following reason(s):

- (A) Landowner Info. Incomplete: _____
- (C) County not Given: _____
- (D) Book, Map, Parcel Incorrect: _____
- (E) Number of Acres Not Given: _____
- (F) Legal Description Incomplete: _____
 - ____ Incomplete Quarter Sections
 - ____ Incomplete/Incorrect Section
 - ____ Incomplete/Incorrect Township
 - ____ Incomplete/Incorrect Range
- (G) Recommendation Not Selected: _____
- (H) Date Of Approval Not Given: _____
- (I) Well owner Info. Incomplete: _____
- (2) Action Requested (check one): _____
- (3) Starting Date Not Given: _____
- (4) Casing To Be Used (answer all): _____
- (5) Design Capacity of Pump : _____
- (6) Lessee Info. Incomplete: _____
- (7) Primary Water Use Not Given: _____
- (8) Other Water Uses Not Given: _____

(9) Place of Use Incomplete (refer to "F"): _____

(10) Type of Well (check one): _____

(11) Select One (define "other"): _____

(12) Select "Yes" or "No": _____

(13) Incomplete Driller Information: _____

(14) Printed Name/Title Not Given: _____

(15) Incorrect/Unauthorized Signature: _____

Requires Current Forms: _____

Please Refer to the Attached Letter: ☒

Requires \$10.00 Filing Fee: _____

Other Reason(s): _____

Initials JA

In accordance with A.R.S. § 45-596, Paragraph D, this application is being returned as a "statement of determination", requesting information necessary to make it correct and complete. If the necessary information is not received by the Department within sixty (60) days, the application may be denied. You would then have to re-initiate the N.O.I. process to receive a drilling authority for this location. If you have any questions, please contact the Groundwater Management Support Section at (602) 417-2470. **ATTACH THIS CHECK LIST WHEN RESUBMITTING THE COMPLETED NOTICE OF INTENT AND RETURN TO BOX 458, PHOENIX, ARIZONA 85004-3003. YOU MAY ALSO CONTACT YOUR DRILLER OR COUNTY ASSESSORS OFFICE FOR ASSISTANCE PERTAINING TO THE NECESSARY INFORMATION THAT IS REQUIRED TO COMPLETE YOUR APPLICATION.**

ARIZONA DEPARTMENT OF WATER RESOURCES

Groundwater Management Support Section

500 North Third Street, Phoenix, Arizona 85004

Telephone 602 417-2470

Fax 602 417-2422

November 17, 2000



JANE DEE HULL
Governor

RITA PEARSON
MAGUIRE
Director

SMI Holdings, LLC
153 E. 53rd Street
New York, NY 10022

RE: Well Registration # 583962

Well File A (2-4) 26 CDA

Dear Sirs:

Your application to drill a monitor well within the Phoenix Active Management Area was received on October 18, 2000. The Department has determined that it is incomplete and incorrect. The form you filed is for drilling a new monitor or piezometer well, neither of which is intended to pump groundwater as its primary purpose. You have indicated that the primary purpose of this well is to withdraw contaminated groundwater from the Middle Alluvial Unit, treat the water to remove contaminants, and re-inject the treated water into the Upper Alluvial Unit. In order to construct this pump and treat system, you submit a Notice of Intent to Drill, Deepen, Modify, or Replace a Well. The proper forms and instructions are attached. Copies are being sent to your consultant, LFR Levine-Fricke, in the event you wish your consultant to file these applications for you.

In accordance with A.R.S. § 45-596.D, this application is being returned to you requesting information necessary to make it complete and correct (the correct form). Please return all papers. If the necessary information is not received by the Department within sixty (60) days, the application may be denied. You would then have to re-initiate the Notice of Intent to Drill process to receive a drilling authority for this location.

If you have any questions, please call the Groundwater Management Support Section at 602-417-2470. Thank you for your cooperation.

Sincerely,

Alan R. Dulaney

attachments

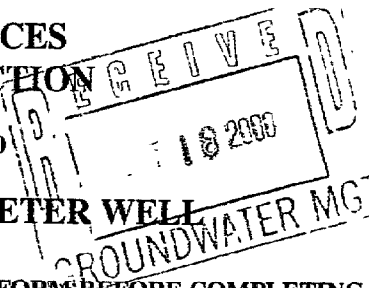
cc: Marshall Brown
LFR Levine-Fricke
8230 E. Raintree Drive
Scottsdale, AZ 85260

ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION

MAIL TO: P.O. BOX 458, PHOENIX, ARIZONA 85001-0458
FOR INFORMATION: CALL MONICA ORTIZ AT 602-417-2470

NOTICE OF INTENTION TO DRILL MONITOR/PIEZOMETER WELL

PLEASE READ GENERAL INSTRUCTIONS AND CONDITIONS ON REVERSE SIDE OF THIS FORM BEFORE COMPLETING.



1. Well/Land Location:

2 NS 4 EW 26 Section
Township Range
NE 1/4 SE 1/4 SW 1/4
10 Acre 40 Acre 160 Acre

2. Position location of the well on the land:

Latitude 33 ° 29 ' 0 "
Longitude 111 ° 55 ' 1 "

3. County: Maricopa

4. Owner of the well:

SMI Holdings, LLC.
Name
153 E. 53rd Street
Mailing Address
New York New York 10022-4611
City State Zip

Telephone No. 212-258-4419

5. Lessee of the land of wellsite:

SMI Holdings, LLC.
Name
153 E 53rd Street
Mailing Address
New York, New York 10022-4611
City State Zip

Telephone No. 212-258-4419

6. Owner of the Land of Wellsite:

Banner Health System
Name
7575 East Earll Drive
Mailing Address
Scottsdale Az. 85251
City State Zip

Telephone No. 480-941-7525

7. Consulting firm:

LFR Levine-Fricke
Name
Marshall Brown
Contact Person

Telephone No. 480-905-9311

8. Purpose of well drilled pursuant to this notice:

Monitor 6" dia production well
Piezometer

9. If for deepening or modifying, list well registration number:
55- Not applicable

10. Will this proposed well be associated with a permit: Yes No
If yes, Permit No.

11. Construction will start:

October 30 2000
Month Day Year

12. Period well will remain in use:

Indefinite Months/Years

13. For monitoring wells, is pump equipment to be installed?

Yes X No

(a) If yes, design pump capacity:

200 gpm

(b) What use will be made of the water:

treatment of middle alluvia
aquifer water reinject into
upper alluvial aquifer

14. Drilling Firm:

Layne Christensen Co.
Name
12030 E. Riggs Road
Mailing Address
Chandler AZ. 85249
City State Zip
480-895-9336
Telephone No.
473
DWR License Number
A-4
ROC License Category

* FOR DEPARTMENT USE ONLY	
File No. <u>A(2-4)26 CDA</u>	
Filed <u> </u> By <u> </u>	
Input <u> </u> By <u> </u>	
DUPLICATE	
Mailed <u> </u> By <u> </u>	
Registration <u>55-583962</u>	
AMA/INA <u>PWX</u>	
W/S <u>07</u> S/B <u>06</u>	
Ind. <u> </u>	

C-02

15. Proposed method of abandonment of well after project is completed: In accordance with applicable Arizona

Department of Water Resources Regulations, pursuant to R12-15-816.

16. Is this well to monitor existing contamination? Yes Potential contamination: Production
well to remove water containing trichloroethene (TCE) Reinject treated water

17. If construction plans have been coordinated with Arizona Department of Environmental Quality, who is the agency contact?

18. If construction plans have been coordinated with Arizona Department of Water Resources, who is the agency contact?

19. WELL CONSTRUCTION PLAN:

- 20. Include detailed construction diagram showing expected water depth in feet below land surface, and details of vault, if specified.**

I state that this Notice is filed in compliance with Rule A.A.C. R12-15-809, is complete and correct to the best of my knowledge and belief and that I understand the conditions set forth on this form.

David Stryker, Secretary & General Counsel DSTX 16 Oct. 2000
 Typed or Printed Name and Title Signature [] Land Owner ☒ Lessee of Wellsite, Title Date

Necessary Steps and Instructions to Obtain Drilling Authority (Monitor/Piezometer Wells)

1. Arizona Revised Statutes ("A.R.S.") § 45-596 provides that prior to drilling a monitor or piezometer well, a Notice of Intention to Drill must be filed with the Department. To assist you in understanding the substantive requirements for this application, copies of A.R.S. § 45-596 and Arizona Administrative Code ("A.A.C.") R12-15-810 are available thru the department bookstore.
2. Information to complete items 1, 2, and 3 may be available from your County Tax Receipt or your County Assessors Office
3. Information to complete item 9 is available from your copy of the original Notice of Intent to Drill or our Records Division at (602)417-2405.
4. Information to complete items 11, 14 and 15 may be available from your driller.
5. If an individual other than the land owner or lessee signs this notice, an original **notarized** letter of authorization from the land owner/lessee, stating that the individual has permission to sign this specific Notice on his or her behalf, must accompany the Notice of Intention to Drill a Monitor/Piezometer Well.
6. Please complete two original notices with original signatures and include a \$10.00 check or money order for the processing fee, in accordance with A.R.S. § 45-113. Submit them to: P.O. Box 458, Phoenix, Arizona 85001-0458.

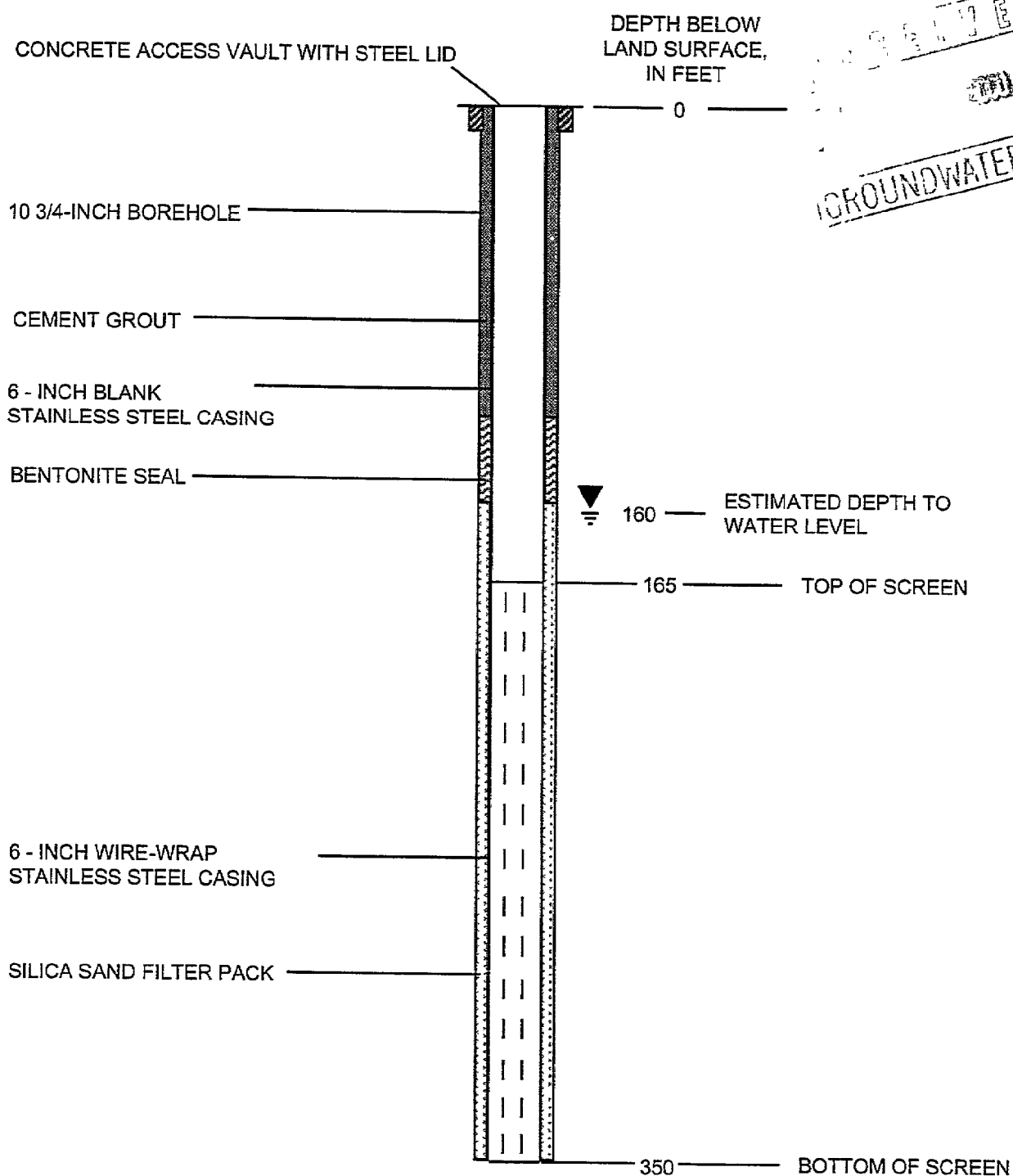
TIME FRAME FOR REVIEW OF YOUR APPLICATION

Within 15 days after receipt of your Notice of Intention, the Arizona Department of Water Resources ("Department") will determine whether your application should be granted or denied, unless this time is extended for lack of a complete application. If your application is incomplete, the Department will notify you in writing and will specify what information is necessary to make the application complete. Until the missing information is received, the time frame for review of your application will be suspended. Your application will not be complete until all of the requested information is received. If you do not supply the missing information within sixty (60) days, the Department may deem your application withdrawn and close the file.

At the end of its review, the Department will send you written notice either granting or denying your application for drilling authority. If your application is approved, the Drill Card will be mailed directly to the drilling company. If denied, the Department's notice will state justification for the denial and an explanation of your right to appeal.

Construction and Follow-up Requirements

1. Construction and abandonment standards for all wells must be in accordance with Department Rules.
2. A.A.C. Rule R12-15-811(H)(2) requires a monitor well to be identified as such on the vault cover or at the top of the steel casing. Identification information must include the well registration number.
3. Pursuant to A.R.S. § 45-596(E), drilling, deepening or modification of the well must be completed within one year after the date of the Notice of Intent.
4. A Well Driller Report is required within thirty (30) days of completion of drilling. Within thirty (30) days after installation of pumping equipment in monitor wells, a Completion Report must be filed with the Department.
5. Pump equipment may not be installed on a well drilled for piezometer purposes. If a monitor well is pumped, pumping is limited to the maximum amount required for monitor purposes, but in no case may exceed 35 gallons per minute and an annual total volume of 10 acre feet.
6. Special construction standards required pursuant to A.A.C. Rule R12-15-821:

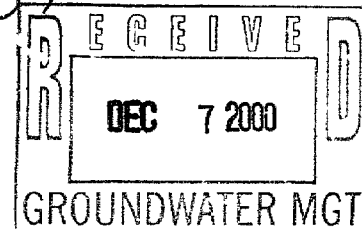


LETTER OF TRANSMITTAL

November 27, 2000

Mr. David Stryker
SMI Holdings, LLC
153 E. 53rd St.
New York, NY 10022

FED EXP TO



Re: Well Registration #583962

The following items are enclosed via Federal Express

Description	No. of Copies
Notice of Intention to Drill, Deepen, Replace, or Modify a Well, attached well schematic	2

The item(s) are transmitted: ☐ At your request ☒ For your action
☐ For your review/comment ☐ For your files
☐ For your approval ☐ For your information

Comments:

Dear Mr. Stryker,

We have filled out the attached forms as per the request of Alan Dulaney of the Arizona Department of Water Resources (letter received 11/21/2000). Please sign the enclosed forms and return both of them to Mr. Dulaney immediately at:

Arizona Department of Water Resources
Groundwater Management Support Section
PO Box 458
Phoenix, Arizona 85001-0458

Please call me at 480-905-9311 if you have any questions. Thank You.

Sincerely,

Eric Rogoff

Eric Rogoff, R.G., C.E.G., C.S.
Senior Project Hydrogeologist

cc: To Mr. Rogoff at
Levine Fricke

SMT Holdings

WOARF Tracking Sheet

WELL REGISTRY No. 55-583962

CADASTRAL LOCATION: A(2-4)26 COA

Date Received 10-18-00

Date to Water Quality 10-26-00

Date Returned to GMSS _____

Date to Hydrology _____

Variance Letter Received

Yes _____

No ☒

Well diagram Received

Yes ☒

No _____

TYPE OF WELL:

Monitor/Piezometer 1

Other _____

Domestic _____

NOI to Abandon _____

Geotechnical _____

WATER QUALITY - WOARF ANALYST COMMENTS:

Drilling one monitor well located in the
North Indian Bend Wash CERCLA site

Site Map attached - Referred to Hydrologist

Subbasin Map attached - Returned to GMSS

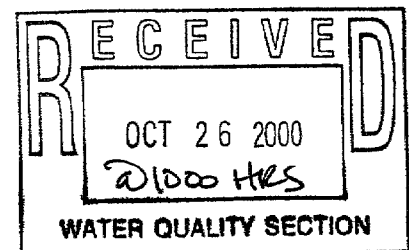
☒

WATER QUALITY APPROVAL:

Granted ☒

Not granted _____

Letter issued ☒



Signature: Shannon L. Raf

Date: 10-26-00

HYDROLOGY DIVISION - WOARF HYDROLOGIST COMMENTS:

HYDROLOGY DIVISION

Granted _____

Not Granted _____

Letter Issued _____

Signature: _____

This is a
production well
to remove
contam. water &
re-inject
-go through poor quality
permit?

ired _____
ited _____
ued _____

in NORTH INDIAN BEND WASH NPL site
Township 02.0n Range 04.0e Section 26 CDA (A02004026CDA)
is in Phoenix AMA* C
is in MARICOPA county 07
is in PHOENIX AMA basin EAST SALT RIVER VALLEY subbasin* 06
* Asterisk after the subbasin indicates groundwater basins or subbasins
that contain a Superfund or WQARF site
is in SALT RIVER watershed 07
is in NORTH INDIAN BEND WASH NPL site 002

Click Back to return to the form.

ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION

MAIL TO: P.O. BOX 458, PHOENIX, ARIZONA 85001-0458
FOR INFORMATION: CALL MONICA ORTIZ AT 602-417-2470

NOTICE OF INTENTION TO DRILL MONITOR/PIEZOMETER WELL

PLEASE READ GENERAL INSTRUCTIONS AND CONDITIONS ON REVERSE SIDE OF THIS FORM BEFORE COMPLETING.

1. Well/land Location:

2 N S 4 E W 26
Township Range Section
NE 1/4 SE 1/4 SW 1/4
10 Acre 40 Acre 160 Acre

2. Position location of the well on the land:

Latitude 33 ° 29 ' 0 "
Longitude 111 ° 55 ' 1 "

3. County: Maricopa

4. Owner of the well:

SMI Holdings, LLC.
Name
153 E. 53rd Street
Mailing Address
New York New York 10022-4611
City State Zip
Telephone No. 212-258-4419

5. Lessee of the land of wellsite:

SMI Holdings, LLC.
Name
153 E. 53rd Street
Mailing Address
New York, New York 10022-4611
City State Zip
Telephone No. 212-258-4419

6. Owner of the Land of Wellsite:

Banner Health System
Name
7575 East Earll Drive
Mailing Address
Scottsdale, Az. 85251
City State Zip

Telephone No. 480-941-7525

7. Consulting firm:

LFR Levine-Fricke
Name
Marshall Brown
Contact Person
Telephone No. 480-905-9311

8. Purpose of well drilled pursuant to this notice:

Monitor 6" dia production well
Piezometer

9. If for decommissioning of well
registr
55- NC

* FOR
File No. 6
Filed
Input
Mailed
Registrati
AMA/INA
W/S
10

C-02

LFR LEVINE-FRICKE
8270 E. RAINBOWS DR
SUITE 103
SCOTTSDALE
85260

10. Will this proposed well be associated with a permit: Yes _____ No X
If yes, Permit No. _____

11. Construction will start:

October 30 2000
Month Day Year

12. Period well will remain in use:

Indefinite Months/Years

13. For monitoring wells, is pump equipment to be installed?

Yes X No _____

(a) If yes, design pump capacity:

200 gpm

(b) What use will be made of the water:

treatment of middle alluvial
water reinject into
alluvial aquifer
for

Christensen Co.

Riggs Road

Ariz. 85249

State Zip
336

Number

Category

cable Arizona

Pursuant to R12-15-816.

15. Proposed method of abandonment of well after project is

Department

16. Is this well to monitor existing contamination? Yes Potential contamination: _____ Please explain: Production

well to remove water containing trichloroethene TCE Reinject treated water

17. If construction plans have been coordinated with Arizona Department of Environmental Quality, who is the agency contact? _____

18. If construction plans have been coordinated with Arizona Department of Water Resources, who is the agency contact? _____

19. WELL CONSTRUCTION PLAN:

- a) Drilling method (mud rotary, hollow-stem auger, etc.) Ingersoll THGO (Air Rotary Casing Hammer)
- b) Borehole diameters: 10 3/4 inches from 0 feet to 355 feet.
inches from _____ feet to _____ feet
- c) Casing materials (PVC, steel, hollow-stem auger, etc.)
material Stainless Steel diameter 6 inches from 0 feet to 170 feet.
material Stainless Steel diameter 6 inches from 170 feet to 350 feet.
Screen
- d) Method of sealing at reductions _____
- e) Annular seal materials (cement, grout, etc.); method of placement (tremied, circulated):
material Neat Cement Grout method Tremie from 0 feet to 155 feet.
material Benetonite Pellet method Pour from surface from 155 feet to 160 feet.
- f) Filter packs (state material):
material No. 8/12 CSST from 160 feet to 350 feet.
material 0.020" wire wrapped from 165 feet to 350 feet.
- g) Perforations or screen specifications:
Type _____ from _____ feet to _____ feet.
Type _____ from _____ feet to _____ feet.
- h) Method of well development (bail, air lift, surge) bail and surge pump
- i) Will surface or conductor casing extend above grade?: Yes _____ No X

20. Include detailed construction diagram showing expected water depth in feet below land surface, and details of vault, if specified.

I state that this Notice is filed in compliance with Rule A.A.C. R12-15-809, is complete and correct to the best of my knowledge and belief and that I understand the conditions set forth on this form.

David Stryker, Secretary & General Counsel DSS 16 Oct. 2000
Typed or Printed Name and Title Signature [] Land Owner ☒ Lessee of Wellsite, Title Date

Necessary Steps and Instructions to Obtain Drilling Authority (Monitor/Piezometer Wells)

1. Arizona Revised Statutes ("A.R.S.") § 45-596 provides that prior to drilling a monitor or piezometer well, a Notice of Intention to Drill must be filed with the Department. To assist you in understanding the substantive requirements for this application, copies of A.R.S. § 45-596 and Arizona Administrative Code ("A.A.C.") R12-15-810 are available thru the department bookstore.
2. Information to complete items 1, 2, and 3 may be available from your County Tax Receipt or your County Assessors Office.
3. Information to complete item 9 is available from your copy of the original Notice of Intent to Drill or our Records Division at (602)417-2405.
4. Information to complete items 11, 14 and 15 may be available from your driller.
5. If an individual other than the land owner or lessee signs this notice, an original notarized letter of authorization from the land owner/lessee, stating that the individual has permission to sign this specific Notice on his or her behalf, must accompany the Notice of Intention to Drill a Monitor/Piezometer Well.
6. Please complete two original notices with original signatures and include a \$10.00 check or money order for the processing fee, in accordance with A.R.S. § 45-113. Submit them to: P.O. Box 458, Phoenix, Arizona 85001-0458.

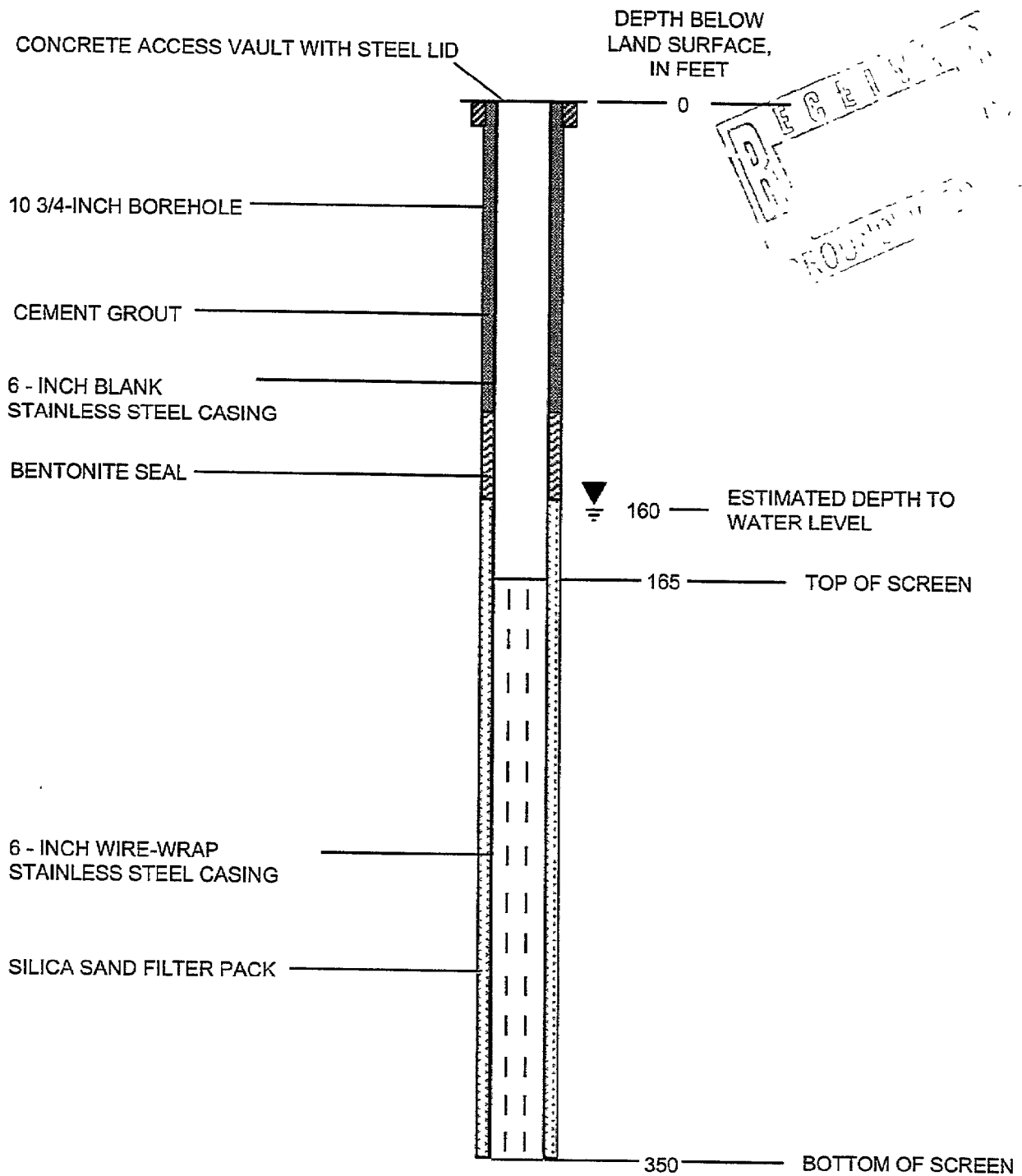
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3. Pursuant to A.R.S. § 45-596(E), drilling, deepening or modification of the well must be completed within one year after the date of the Notice of Intent.
4. A Well Driller Report is required within thirty (30) days of completion of drilling. Within thirty (30) days after installation of pumping equipment in monitor wells, a Completion Report must be filed with the Department.
5. Pump equipment may not be installed on a well drilled for piezometer purposes. If a monitor well is pumped, pumping is limited to the maximum amount required for monitor purposes, but in no case may exceed 35 gallons per minute and an annual total volume of 10 acre feet.
6. Special construction standards required pursuant to A.A.C. Rule R12-15-821: _____



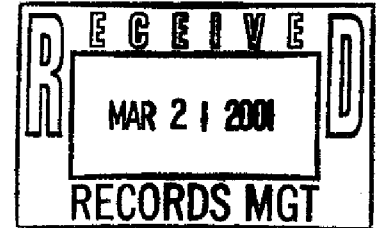
ARIZONA DEPARTMENT OF WATER RESOURCES
500 North 3rd Street
Phoenix, Arizona 85004

WELL DRILLER REPORT

Joseph Delgado
LFR.
342506

This report should be prepared by the driller in all detail and filed with the Department within 30 days following completion of the well.

1. LAYNE CHRISTENSEN COMPANY
12030 EAST RIGGS ROAD
CHANDLER, AZ 85249-3710



2. Owner Name: SME HOLDINGS LLC
Address: NEW YORK NY 10022
City State Zip

3. Location: 2N N/S 4E E/W 26 1/4 NE 1/4 SE 1/4 SW
Township Range Section 10-acre 40-acre 160-acre

4. Well Registration No. 55-583962 (Required)

5. Permit No. _____ (If Issued)

DESCRIPTION OF WELL

6. Total depth of hole 350 ft.
7. Type of casing 6" S.S. 3/16 & 6" LCS
8. Diameter and length of casing 6" LCS in. from 0 to 50, 6" S.S. in from 50 to 190
9. Method of sealing at reduction points _____
10. Perforated from 190 to 350, from _____ to _____ from _____ to _____
11. Size of cuts .020 Number of cuts per foot 288
12. If screen was installed: Length 180 ft. Diam 6" S.S. 3/16 in. Type 1/2" WIRE WRAP
13. Method of construction DRILLED
(drilled, dug, driven, bored, jetted, etc)
14. Date started 3 5 01
Month Day Year
15. Date completed 3 10 01
Month Day Year
16. Depth to water 150 ft. (If flowing well, so state)
17. Describe point from which depth measurements were made, and give sea level elevation if available
GROUND SURFACE
18. If flowing well, state method of flow regulation: _____
19. Remarks: TEX-5 MA

DO NOT WRITE IN THIS SPACE	
OFFICE RECORD	
Registration No. 55- 583962	
File No. A(2-4) 26 CDA	
Received _____	By _____
Entered _____	By _____

LOG OF WELL

Indicate depth at which water was first encountered, and the depth and thickness of water bearing beds. If water is artesian, indicate depth at which encountered, and depth to which it rose in well.

[illegible]

I hereby certify that this well was drilled by me (or under my supervision), and that each and all statements herein contained are true to the best of my knowledge and belief.

Driller Name: LAYNE CHRISTENSEN COMPANY

12030 EAST RIGGS ROAD

Street

CHANDLER, AZ 85249-3710

City

State

Zip

Phone No.

Signature of Driller

Date _____

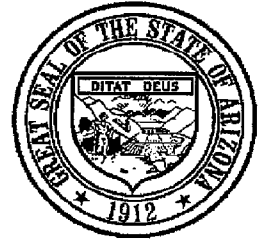
ARIZONA DEPARTMENT OF WATER RESOURCES

500 North 3rd Street, Phoenix, Arizona 85004

Telephone (602) 417-2470

Fax (602) 417-2422

December 14, 2000



JANE DEE HULL

Governor

RITA PEARSON MAGUIRE

Director

SMI HOLDINGS LLC
153 E 53RD ST
NEW YORK, NY 10022-4611

Registration No. 55-583962

File No. A(2-4) 26 CDA

Dear Well Owner:

Enclosed is a copy of the Notice of Intention (NOI) to Drill a well. This NOI, which was recently filed with this Department, is being returned to you as evidence of your compliance with ARS §45-596. The enclosed Completion Report is to be submitted when pump equipment is installed. The Drilling Card and Well Drilling Report form have been sent to your driller. He may not begin drilling until he has received the Drilling Card and it must be displayed on the rig during drilling. If you change drillers, you must supply this Department with the new driller's identity. Please ensure that the driller you select is licensed to drill the type of well you require. All well drillers must pass an examination proving they understand the drilling methods for that particular license, and are familiar with the laws and regulations which govern well construction in Arizona.

If it is necessary to change the location of the proposed well, immediately contact the Department of Water Resources to obtain written permission before proceeding with the drilling. A properly signed, amended Drilling Card must be in the possession of the driller before drilling commences at a different location than originally authorized.

ARS §45-600 requires the registered well owner to submit a completion report within thirty (30) days after the installation of pumping equipment. It also requires the driller to furnish this Department a complete and accurate log of the well within thirty (30) days after completion of drilling. You should insist, and ensure, that both of these are done.

If in the course of drilling a new well, it is determined that the new well cannot be successfully completed as initially intended (dry hole, cave in, lost tools, etc.), the new well must be properly abandoned and a Well Abandonment Completion Report submitted per R12-15-816.F.

Per ARS §45-593 (C), the person to whom a well is registered shall notify this Department of a change in ownership of the well and/or information pertaining to the physical characteristics of the well in order to keep this well registration file current and accurate. We have enclosed a Change of Well Information Form should it be needed in the future.

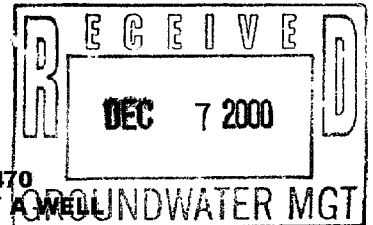
Sincerely,

A handwritten signature in cursive script that reads "Jeannie Aguilar".

Jeannie Aguilar
Water Resource Technician
Groundwater Management Support Section

Enclosures

ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION
MAIL TO: P. O. BOX 458, PHOENIX, ARIZONA 85001-0458
FOR MORE INFORMATION CALL: MONICA ORTIZ 602-417-2470
NOTICE OF INTENTION TO DRILL, DEEPEN, REPLACE OR MODIFY A WELL



PLEASE COMPLETE ALL ITEMS IN THE BOX BELOW DOWN TO COUNTY OR LOCAL AUTHORITY ENDORSEMENT. IF WATER FROM THE PROPOSED WELL (LISTED BELOW) WILL BE USED FOR DOMESTIC PURPOSES ON A PARCEL OF LAND 20 OR FEWER ACRES, THE APPLICABLE COUNTY OR LOCAL HEALTH AUTHORITY MUST ENDORSE ALL ITEMS IN THE BOX BEFORE SUBMISSION TO THE DEPARTMENT OF WATER RESOURCES. ITEMS C, D, E, AND F MAY BE AVAILABLE FROM YOUR COUNTY ASSESSOR'S OFFICE.

A. BANNER HEALTH SYSTEM 7515 EAST EARLL DRIVE SCOTTSDALE AZ 85251
LANDOWNER'S NAME CURRENT MAILING ADDRESS CITY STATE ZIP
B. TELEPHONE NO. 480-941-7525 COUNTY ASSESSOR'S PARCEL ID INFORMATION:
C. WELL LOCATED IN MARKOPA COUNTY D. NCL 169 29 1309028 A+B E. 6.13 OFFICIAL
BOOK MAP PARCEL # OF ACRES SEAL OR
F. NE 1/4 SE 1/4 SW 1/4 OF SECTION 26 TOWNSHIP 2 N RANGE 4 E STAMP
10AC 40AC 160AC COUNTY OR LOCAL AUTHORITY ENDORSEMENT
CHECK ONE:
G. RECOMMEND APPROVAL _____; INSUFFICIENT INFORMATION TO MAKE A DETERMINATION _____; VARIANCE REQUIRED _____ (EXPLANATION ATTACHED)
H. DATE _____ AUTHORIZED SIGNATURE _____ TITLE _____

1. OWNER OF WELL:
SMT HOLDINGS LLC
NAME
153 E. 53rd STREET
CURRENT MAILING ADDRESS
NEW YORK NEW YORK 10022-4611
CITY STATE ZIP
TELEPHONE NUMBER 212-258-4419

2. ACTION REQUESTED:
DRILL NEW WELL ☒ DEEPEN _____
MODIFY _____ REPLACE _____
WELL REGISTRATION NO 55-583962

FOR A REPLACEMENT WELL PROVIDE:
MAX. CAPACITY OF THE ORIGINAL WELL
NA GALLONS PER MINUTE;
DISTANCE FROM THE ORIGINAL WELL:
NA FEET

3. CONSTRUCTION WILL START ABOUT:
MONTH 12 YEAR 2000

4. TYPE OF CASING FOR PROPOSED WELL:
SURFACE CASING: STAINLESS STEEL
DIAMETER: 6" DEPTH: _____

DOWNHOLE CASING: STAINLESS STEEL
DIAMETER: 6" DEPTH: 350'

5. DESIGN PUMP CAPACITY:
150 GALLONS PER MINUTE

6. LESSEE OF LAND OF WELL SITE:
SMT HOLDINGS, LLC.
NAME
153 E. 53rd STREET
CURRENT MAILING ADDRESS
NEW YORK NEW YORK 10022-4611
CITY STATE ZIP
TELEPHONE: 212-258-4419
7. PRINCIPAL USE OF WATER: (BE SPECIFIC)
PRODUCTION WELL TO REMOVE WATER
CONTAINING TRICHLOROETHYLENE (TCE)
8. OTHER USES OF WATER: (BE SPECIFIC)
REJECT TREATED WATER

* FOR DEPARTMENT USE ONLY
REGISTRATION NO. 55-583962
DATE FILED 12-7-00
FILE NO. A12-4126 CDA
AMA/TNA Phoenix
W/S 01 S/B 06
PROCESSED BY JO
DATE MAILED 12-14-00

C-02

9. PLACE OF USE (LEGAL DESCRIPTION OF LAND):
NE 1/4 SE 1/4 SW 1/4 SECTION 26
10AC 40AC 160AC
TWN SHP 2 N RNS 4 E W

10. TYPE OF WELL (CHECK ONE):
EXEMPT ☒ NON-EXEMPT _____

11. CHECK ONE:
RESIDENTIAL _____ STOCKWATER _____
OTHER ☒ _____

12. IS THE PROPOSED WELL SITE WITHIN 100 FEET OF A SEPTIC TANK SYSTEM, SEWER DISPOSAL AREA, LANDFILL, HAZARDOUS MATERIALS OR PETROLEUM STORAGE AREAS AND TANKS?
YES _____ NO ☒

13. DRILLING FIRM:
LAYNE CHRISTENSEN CO.
NAME
2030 E. RIGGS RD.
MAILING ADDRESS
CHANDLER AZ 85249
CITY STATE ZIP
480-895-9336
TELEPHONE NO.
473 007
DWR LICENSE NUMBER
A-4
ROC LICENSE CATEGORY

I STATE THAT THIS NOTICE IS FILED IN COMPLIANCE WITH A.R.S. § 45-596, IS COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AND THAT I UNDERSTAND THE LIMITATIONS AND CONDITIONS SET FORTH ON THE REVERSE SIDE OF THIS FORM.

DAVID STRYKER, SECRETARY
14. TYPE OR PRINT NAME AND TITLE
AND GENERAL COUNSEL

15. SIGNATURE OF LANDOWNER/LESSEE OF WELL SITE

16. DATE
1/12/00

APPLICATION GUIDELINES

In accordance with Arizona Revised Statutes ("A.R.S.") §§ 41-1008 and 1079, the Department of Water Resources (Department) provides information regarding the application review process for authority to drill.

NECESSARY STEPS & INSTRUCTIONS TO OBTAIN DRILLING AUTHORITY

1. Pursuant to A.R.S. § 45-596, a person may not drill, cause to be drilled, deepen or modify any well for which a permit is not required without filing a Notice of Intent to Drill with the Department. Only a well drilling contractor licensed in the State of Arizona or a single well licensee, person licensed to drill or modify one exempt well on his or her own property) is authorized to drill, deepen or modify a well. Drilling may not begin until the well drilling contractor or licensee has possession of a drilling card at the well site, issued by the Director in the name of the well drilling contractor or licensee, and which authorizes the drilling of the specific well in a specific location. To assist you in understanding the requirements for this application, copies of A.R.S. § 45-596 and Arizona Administrative Code ("A.A.C.") R12-15-810 are available at the Department bookstore (602-417-2450 x7127).
2. If replacing, deepening, or modifying an existing well, provide the registration number of the existing well in item 2. A replacement well is one located no more than 660 feet from the original well and that is not expected to annually withdraw more groundwater than historically withdrawn from the original well.
3. Information to complete items 3, 4, 5 and 13 may be available from your driller.
4. Information to complete items 9 and 12 may be available from your County Assessor's Office.
5. For item 10, in an Active Management Area, A.R.S. § 45-454 only allows non-irrigation uses for "exempt" wells. If the proposed use includes the growing of 2 or more acres of plants for sale or human/animal consumption (irrigation use), the well does not qualify as an exempt well.
6. An exempt well, referred to in Item 10, means a well with a pump with a maximum capacity of not more than thirty-five gallons per minute and used for non-irrigation purposes.
7. For item 11, in an Active Management Area, A.R.S. § 45-454 allow up to 56 acre feet per year of pumping from a domestic (residential) or stock watering exempt well, and up to 10 acre ft per year from an exempt well used for other (usually commercial non-irrigation) purposes.
8. If any water from a proposed well on a parcel of twenty or fewer acres will be used for domestic purposes, as defined in § 45-454, the applicant must submit a well site plan of the property. The plan must be on an 8½" x 11" piece of plain paper with representation of the locations of all structures and proximity of adjacent lot lines, to scale. It must include the county assessor's parcel identification number. The plan must show the proposed well location and the location of any septic tank or sewer system that is either located on the property or within one hundred feet of the proposed well site, as well as indicating the measured shortest distance between the proposed well and existing septic tank system. **The plan must demonstrate that the well will not be drilled within one hundred feet of any septic or sewer system.**
9. The site plan must be approved by the county health authority, or by a local health authority in areas where the county health authority has delegated authority to approve septic or sewer systems. Endorsement by the county/local authority is based solely on the best available judgement that the proposed well, as shown on the site plan submitted, is 100 feet or more from all known and visually identifiable sewage treatment systems. It is not a representation that a well placed at this site will be guaranteed as to quantity or quality. In areas where there is no local or county authority that controls installation of septic tanks or sewer systems, or if the health authority is unable to determine whether the proposed well location complies with state and local requirements, the applicant must apply for approval directly to the Department of Water Resources.
10. If an individual other than the land owner or lessee signs this notice, an original letter of authorization from the land owner/lessee, stating that the individual has permission to sign this specific notice on his or her behalf, must accompany the notice.
11. Please mail **two original Notices with original signatures and two site plans** and, in accordance with A.R.S. § 45-113, a **check or money order (no cash) in the amount of \$10.00** to P. O. Box 458, Phoenix Arizona, 85001-0458, or hand deliver to 500 North Third Street, Phoenix, Arizona.
12. Arizona Revised Statute § 45-596(D) provides that the Director of the Department is to determine whether or not all information required on this form has been submitted. If not, the person filing the Notice will be notified, and the drilling or modification of the well may **not** proceed.
13. This form is not applicable for non-exempt wells (those yielding more than thirty-five gallons per minute) within an Active Management Area. Contact Groundwater Management for further information regarding the appropriate notice to file with the Department.

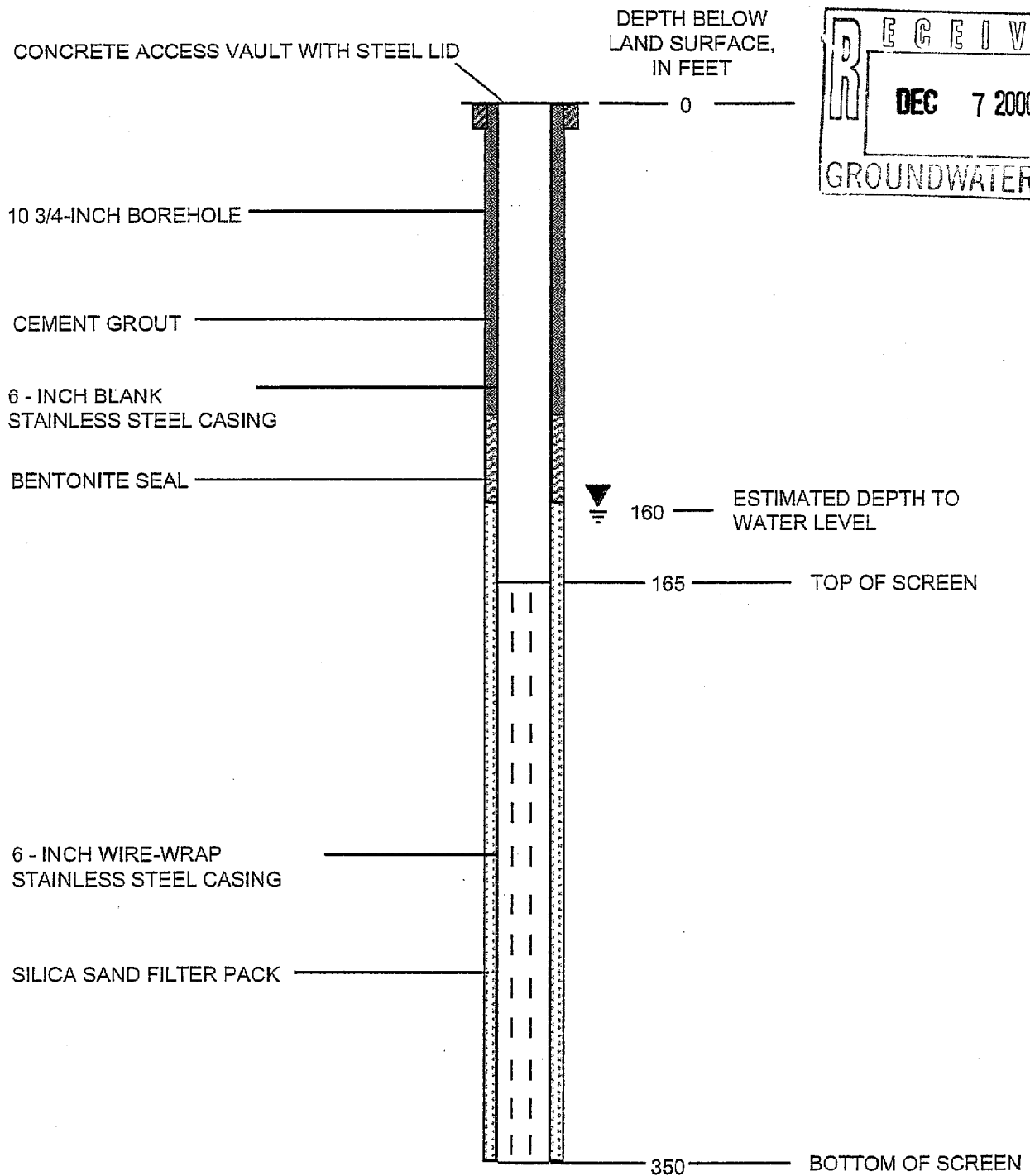
TIME FRAME FOR REVIEW OF YOUR APPLICATION

Within 15 days after receipt of your Notice of Intention the Arizona Department of Water Resources ("Department") will determine whether your application should be granted or denied, unless this time is extended for lack of a complete application. If your application is incomplete, the Department will notify you in writing and will specify what information is necessary to make the application complete. Until the missing information is received, the time frame for review of your application will be suspended. Your application will not be complete until all of the requested information is received. If you do not supply the missing information within sixty (60) days, the Department may deem your application withdrawn and close the file.

At the end of its review, the Department will send you a written notice either granting or denying your application for drilling authority. If your application is approved, the Drill Card will be mailed directly to the drilling contractor. If denied, the Department's notice will state justification for the denial and an explanation of your right to appeal.

CONSTRUCTION AND FOLLOW UP REQUIREMENTS

1. Construction and abandonment standards for wells, must be in accordance with Department Regulations. A.R.S. § 45-594 and Arizona Administrative Code R12-15-811 require the well to be constructed with a twenty foot steel surface seal casing, including a one foot steel stickup and one and one-half inches of grout seal around the casing from the surface to a depth of twenty feet, unless a variance is granted (see A.R.S. § 45-596 (G) for procedure to follow in requesting a variance).
2. Pursuant to § 45-596(E), the drilling, deepening or modification of the well must be completed within one year of the date of the Notice of Intent. If the well is not completed within one year, a new Notice of Intent must be filed before proceeding with further construction.
3. If a well which was originally drilled as an exploration well, a monitor well, a piezometer well or for any use other than domestic use is later proposed to be converted to use for domestic purposes as defined in § 45-454, the well owner must file a Notice of Intention to Drill and comply with the requirements of § 45-596 before the well is converted and any water from that well is used for domestic purposes.
4. Within thirty days after installation of pumping equipment, the registered well owner must file a Completion Report with the Department. The person to whom a well is registered also must notify the Department of a change in ownership or a change in data relating to this well.



ARIZONA DEPARTMENT OF WATER RESOURCES

Water Quality Assurance Program
500 North Third Street, Phoenix, Arizona 85004
Telephone 602 417-2473
Fax 602 417-2426



JANE DEE HULL
Governor

RITA P. PEARSON
Director

Dear Well Applicant/Well Driller:

The Arizona Department of Water Resources recently received your Notice of Intention to Drill a well located in a groundwater basin or sub-basin that contains a remedial site that is managed through either the Water Quality Assurance Revolving Fund (WQARF) program, the Comprehensive Environmental Response, Compensation and Liability Act (CERCLA) program, or the Department of Defense (DoD). Pursuant to the Arizona Revised Statutes § 45-605(E), the Department is required to inform you that the location of the well(s) listed on your well application is within a groundwater basin or sub-basin that contains a WQARF, CERCLA or DoD site.

Please refer to the map included on the other side of this letter to determine which specific WQARF, CERCLA, or DoD sites are located within the same groundwater basin or sub-basin as the well(s) indicated on your application. If you would prefer to review a more detailed map for a specific remedial site, or obtain more specific information, you may review the Arizona Department of Environmental Quality's internet site at the following internet address:

<http://www.adeq.state.az.us/environ/waste/sps/siteinfo.html>

Although the location of your well(s) is determined to be within a groundwater basin or sub-basin containing a WQARF, CERCLA, or DoD site, this letter is intended strictly for informational purposes. Please note that many of the groundwater basins or sub-basins in Arizona encompass large geographic areas.

If you have any questions about the contents of this letter or any specific WQARF, CERCLA or DoD sites in the groundwater basin or sub-basin where your well is located, or if you would like to review a more detailed map depicting individual remedial site boundaries and do not have access to the internet, please contact the Department's Water Quality Assurance Program at (602) 417-2473.

Water Quality Assurance Program Unit

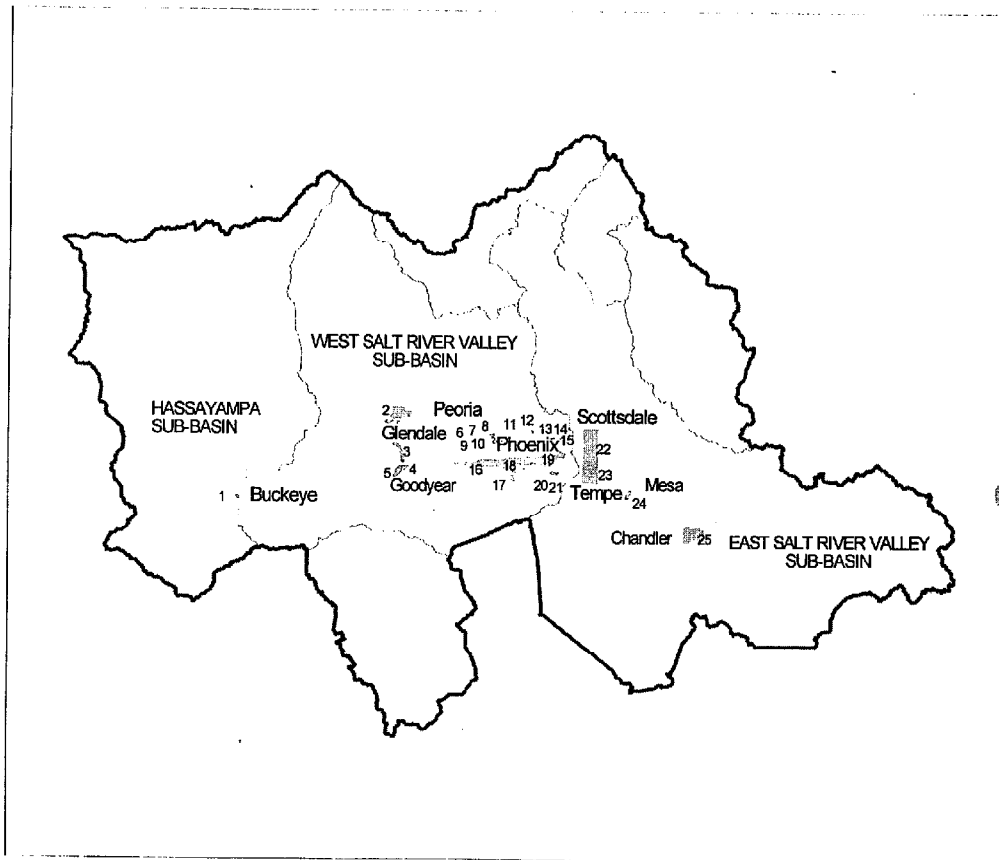
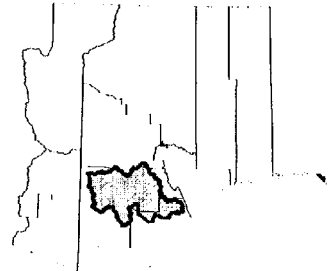
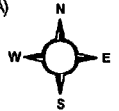
Phoenix Active Management Area Groundwater Basin WQARF, CERCLA and DoD Sites



WQARF = Water Quality Assurance Revolving Fund
CERCLA = Comprehensive Environmental
Response Compensation and Liability Act
DoD = Department of Defense

WQARF, CERCLA and DoD Sites

1. Hassayampa Landfill (CERCLA)
2. Luke AFB (CERCLA)
3. Phoenix Goodyear Airport-North (CERCLA)
4. Western PCE (WQARF)
5. Phoenix Goodyear Airport-South (CERCLA)
6. West Central Phoenix-North Plume (WQARF)
7. West Central Phoenix-North Canal Plume (WQARF)
8. West Central Phoenix-West Osborne Complex (WQARF)
9. West Central Phoenix-East Grand Ave. (WQARF)
10. West Central Phoenix-West Grand Ave. (WQARF)
11. Central & Camelback (WQARF)
12. 16th St. & Camelback (WQARF)
13. East Central Phoenix-38th St. & Indian School (WQARF)
14. East Central Phoenix-40th St. & Indian School (WQARF)
15. East Central Phoenix-48th St. & Indian School (WQARF)
16. West Van Buren (WQARF)
17. 19th Ave. Landfill (CERCLA)
18. E. Washington Fluff (WQARF)
19. Motorola 52nd St. (CERCLA)
20. 161st Air National Guard (DoD)
21. Estes Landfill (WQARF)
22. North Indian Bend Wash (CERCLA)
23. South Indian Bend Wash (CERCLA)
24. South Mesa (WQARF)
25. Williams AFB (CERCLA)



WQARF, CERCLA and DoD Remedial Sites



**ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION
MAIL TO: P. O. BOX 458 - PHOENIX ARIZONA 85001-0458**

Phone 602-417-2470

COMPLETION REPORT

(Pump Installation Report)

- A. Per A.R.S. § 45-600.B, the Completion Report is to be filed with the Department within 30 days after installation of pump equipment by the registered well owner.
- B. Drawdown of the water level for a non-flowing well should be measured in feet after not less than 4 hours of continuous operations. For a flowing well the shut-in pressure should be measured in feet above the land surface or in pounds per square inch at the land surface.
- C. The static groundwater level should be measured in feet from the land surface immediately prior to the capacity test.
- D. The tested pumping capacity of the well in gallons per minute for a non-flowing well should be determined by measuring the discharge of the pump after continuous operation for at least 4 hours and for a flowing well be measuring the natural flow at the land surface.
- E. Items 1 and 2 are available from the Notice of Intent to Drill.
- F. Items 3 and 4 may be available from the driller.

1. REGISTRATION NO: 55- _____ **FILE NO:** _____

2. LOCATION OF THE WELL:

<u> N/S </u>	<u> E/W </u>	<u> </u>	<u>1/4</u>	<u>1/4</u>	<u>1/4</u>
Township	Range	Section	10-acre	40-acre	160-acre

3. EQUIPMENT INSTALLED:

Kind of pump _____ Kind of power _____
Turbine, Submersible, Centrifugal, etc. Electric, natural gas, gasoline, etc.

H.P. Rating of Motor _____ Pumping Capacity _____ Date Pump Installed _____

4. WELL TEST:

Test pumping capacity _____ Date Well Tested _____
Gallons per minute

Method of Discharge Measurement _____
Weir, orifice, current meter, etc.

Static Groundwater Level _____ ft. Drawdown _____ ft.

Total Pumping Lift _____ ft. Drawdown _____ lbs
(Flowing Well)

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief.

Print Well Owner's Name _____ Address _____ City _____ State _____ Zip _____

Signature of Well Owner _____ Phone Number _____ Date _____

ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION
MAIL TO: P.O. BOX 458 - PHOENIX, ARIZONA 85001- 0458
FOR INFORMATION: CALL MONICA ORTIZ AT 602-417-2470

REQUEST FORM TO CHANGE WELL INFORMATION
OWNERSHIP * DRILLER

Please complete the appropriate section of this request form and return to P.O. Box 458, Phoenix, Arizona 85001-045. In accordance with A.R.S. § 45-113, please submit the applicable fee. **NOTE: A.R.S. §45-593 (C) requires that the Department be notified of change of well ownership and that the new owner is required to keep the Department's Well Registration records current and accurate. Well data and ownership changes must be submitted within thirty days after changes take place.**

SAVE THIS FORM TO REPORT FUTURE CHANGES IN OWNERSHIP, CHANGES IN ADDRESS, OR CHANGE IN WELL DATA SUCH AS PUMP CAPACITY, CORRECTION OF LEGAL DESCRIPTION, CHANGE OF WELL DRILLER AND AMENDING INFORMATION PREVIOUSLY FILED.

1. CHANGE OF WELL INFORMATION: (NO FEE REQUIRED)

NOTE: If the location of the proposed well changes after drilling authority has been issued, attach a \$10.00 reissue fee for each of the drilling authorities to be changed.

WELL REGISTRATION NO. 55-_____ **FILE NO:**_____

I/We request the following well information be changed: _____

Date _____ Signature of Current Well Owner _____

***Note: This information is on your copy of the Notice of Intent to Drill.**

2. STATEMENT OF CHANGE OF WELL OWNERSHIP: (\$10.00 FEE REQUIRED)

NOTE: If this change consists of more than one well and the names are common: attach a \$10.00 fee. Otherwise, each well requires a separate fee of \$10.00.

I, _____, state that I am the **Previous/New Owner** of the well described below:

_____ $\frac{1}{4}$ _____ $\frac{1}{4}$ _____ $\frac{1}{4}$ of Section _____ Township _____ N/S Range _____ E/W
10 Acre 40 Acre 160 Acre

Assessor's tax parcel number of the parcel on which the well is located: Book _____ Map _____ Parcel _____.

Well Registration No. 55-_____ File No. _____ (if known)

PRINT Previous _____ **Owner's Name**

PRINT New Owner's Name _____

_____ **Mailing Address**

_____ **Mailing Address**

_____ **City** _____ **State** _____ **Zip**

_____ **City** _____ **State** _____ **Zip**

_____ **Telephone Number**

_____ **Telephone Number**

Signature of Previous/New Well Owner _____ **Date** _____

ARIZONA DEPARTMENT OF WATER RESOURCES
GROUNDWATER MANAGEMENT SUPPORT SECTION
MAIL TO: P.O. BOX 458 - PHOENIX, ARIZONA 85001-0458
FOR INFORMATION: CALL MONICA ORTIZ AT 602-417-2470

3. REQUEST TO CHANGE WELL DRILLER

\$10.00 FEE REQUIRED FOR EACH WELL

This request must be received by this Department and the Drill Authorization issued to the new drilling firm prior to the start of drilling or the completion of the well listed below.

Well Registration No. 55- _____

File No. _____

Original Well Driller

New Well Driller

Mailing Address

Mailing Address

City State Zip

City State Zip

Telephone Number

Telephone Number

ADWR License Number

ADWR License Number

ROC License
Category

Typed or Printed Name of Well Owner

Signature of Well Owner

Date

The fee charged for a change of well ownership and/or reissue of a drill card is authorized by R12-15-151, effective June 30, 1994.



**Arizona Department
of Water Resources**

P.O. BOX 458

Phoenix, Arizona 85001-0458



U.S. POSTAGE

0.55:

H METER 430238

